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LECTURES ON TECHNIQUE IN PSYCHO-ANALYSIS [1]

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I

INTRODUCTION : THE ANALYTIC SITUATION

The difficulties of psycho-analytic technique are conveniently resolved into two groups, those incident to the patient and those incident to the analyst or, in other words, the difficulties inherent in the case-material and those inherent in the method of investigation. Of these, the analyst's own difficulties are the more important, because they influence not only his own attitudes and reactions but colour his view of the *patient's* condition and reactions. At the outset, therefore, we have to come to a definite decision about policy : are we to assume as the basis of our study a hypothetical ' perfectly analysed ' individual making analytic contact with a neurosis of classical outline, or may we take it that the analyst is an ordinary individual who has, through his own analysis, been freed from the main sources of unconscious bias, and is now approaching the routine of ordinary analytic practice where mixed cases of every conceivable sort constitute the greater part of clinical material ? The question might be put in another form ; should we commence with a discussion of phenomena such as transference, resistance, etc., exhibited by the patient or with a discussion of the phenomena of counter-transference, counter-resistance, liable to be exhibited by the analyst ?

In actual fact it will be necessary to combine both plans, and in

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dealing with the *material* presented in analysis to assume that the analyst has been completely freed from all sources of unconscious bias, while in considering the *handling* of this material to assume that the analyst might be influenced by subjective tendencies. To avoid confusion, I propose to indicate on each occasion which of these standpoints is adopted. On the present occasion I intend to consider first of all the general attitude and reaction of the analyst on deciding to start his first case, but before he has actually compassed the first interview. Before doing so I think it is worth while to go back and consider the significance of the term ' perfectly analysed analyst ' : one who is hypothetically ready to cope with any situation and for whom lectures on technique would be superfluous. When we come to consider later the innumerable derivatives from the castration complex, it will be apparent that this somewhat heroic figure may conceivably spring from unresolved elements in this group of reactions, representing, on the one hand, the all-powerful parent who knows everything and does no wrong or ought not to do any, who is perfect and potent, and on the other the dependent child who has renounced his forbidden longings, i.e. is ' perfectly analysed ', pure by virtue of castration. It is a doubly ambivalent attitude and is reflected at one time or other in the ideas and attitudes of every patient. Regarded theoretically, it is a legacy from those earlier days when the conception of the ego was limited, and repressed complexes were vaguely regarded as the sole content of the system Ucs. Freud's distinction of an id system, a reservoir of instinct-tendencies, cleared the ground in this as in innumerable other respects. The repressed is included in this system but is very sharply separated from the ego, whereas the id is not so sharply separated. Successful analysis, then, will have uncovered the repressed ; if it has done so it will by the same token have mitigated the archaic censoring functions of the super-ego, but it can scarcely be expected to abolish the id. In other words, the id is always with us, and the most thoroughly analysed analyst has, like everyone else, to see that his newly-won freedom from automatic archaic control of instinct-excitation does not tend to be weakened from time to time by recourse to easier but ill-adapted methods of ' defence '.

Two other considerations are relevant here. A training analysis is in no way different from a therapeutic analysis ; hence it is scarcely possible, even if it were desirable, for the prospective analyst to have much objective grip of the various libido-movements and ego-alterations occurring during his own analysis. In the next place, even if he did

have this grip, it is not to be concluded that the conduct of his own analysis would necessarily be a serviceable model on which to standardize *all* his subsequent analyses. This is not the place to discuss processes of sublimation, but it is at any rate beyond dispute that some people are stimulated to develop an interest in psycho-analysis to some extent by their own experiences of mental conflict. In such cases the position is clear ; they will fall roughly into some grouping—hysterical, obsessional, depressive, etc.—and will be treated accordingly, so that their most objective view of their own analysis will be that of an analysis appropriate for their particular type. But in fact this is also true of the alleged normal, who usually shews characteristics which are at least reminiscent of the more symptomatic groupings. An obsessional type, for instance, with his devious mechanisms for dealing with affect, is not so likely to have immediate instinctive appreciation of the affective urgencies of an hysterical type ; and the hysterical type would be more inclined to see little point in the roundabout technique of the obsessional. So that even were there no unconscious significance underlying the concept of the ' perfectly analysed analyst ', it is more than questionable if this qualification would exempt anyone from the necessity of technical training.

We need not go further into this for the moment, since the matter will be considered more fully under the heading of counter-resistance, but I think there is some advantage to be obtained from approaching our problem unshackled by the products of omnipotence and inferiority phantasies. We have every right to insist that a prospective analyst should be in touch with his own unconscious tendencies, so that when the occasion arises he will have no axes to grind in the analytic situation, and we may be certain that, if this has been attained, his analysis will have been comparatively thorough.

We are assuming, however, that he has not yet tested his powers by the analysis of an actual case, and some further reassurance may not come amiss. I have the impression that many approach their first case with something of the trepidation which accompanies the young surgeon to his first abdominal operation ; and, if I may pursue this comparison without prejudice, the rational elements in this attitude have much the same basis in both instances. The budding surgeon fortifies himself overnight by careful study of surgical anatomy, only to find that his anticipated difficulties do not materialize, whereas numerous unexpected bewilderments appear from nowhere. In the same way the analyst has gathered from his theoretical reading many so far

uncharted apprehensions about complicated analytic situations; and when these do not appear to materialize immediately may on the rebound proceed cheerfully enough, until he is faced with such a perplexing situation as the heaping up of negative transference. Leaving out of account unconscious motivations, we may say that this wavering judgement and reaction is partly due to the somewhat intimidating nature of the literature on the subject. He has been warned so much, for example, about the ' handling of the transference ' that he may be forgiven for a certain tendency to handle it at inappropriate moments, or to be unduly gingerly in touch at points where free handling is essential.

To continue this line of thought: perhaps one of the greatest difficulties to overcome in early work is what we might call a too ' anatomical ' view of the analytic process: it is a commonplace that a good anatomist is not necessarily a capable surgeon. Here again the stereotyped form of systematic expositions of psycho-analysis is partly responsible for the attitude. It is inevitable that in describing unconscious processes different chapters should be devoted to ' slips ', ' forgetting ', ' dreams ', ' interpretations ', ' resistance ' and so forth; but the analysis of a slip, for example, as it were isolated from the text, is mostly an interesting experience for the analyst. I do not mean to suggest that the analysis of slips is ever to be underrated. On the contrary, it is one of the most valuable and legitimate exercises in analytic technique, to which constant resort will be made. But I do suggest in this particular connection that an ' anatomical ' tendency to hail it with joy and, irrespective of its connections, to nuzzle it on the mat, as it were, smacks more of the analytical connoisseur than the analytic strategist. To give additional point to this, I would remark that there are occasions when a slip has to be treasured for future reference, and in cases of serious ego-disorder it may function as a danger-signal. A suicidal patient I am treating at present frequently confounds the words ' wife ' and ' sister ', but I am not at all happy when the number of these slips increases. When, as very rarely occurs, their form is altered to imply a wife-mother equation, I am not surprised should he take an early opportunity of expressing consciously great hate of his mother, have more restless nights and exhibit renewed interest in knives and razors. To return to slips, the method of seizing upon these as if they were indiscretions on the part of the patient is, I imagine, due to a tendency to regard analysis as an assortment of reactions on the patient's part somehow assembled together and

capable of detection like the constituents of a mixed salt in a ' practical chemistry ' examination. The same tendency reaches its acme of futile isolation when amateur ' analysts ' make social capital of the slips of their friends, usually driving the matter home against the grain with the remark ' Oh, we know what that means'.

I have made use of the slip to illustrate an attitude towards analytic manifestations, but the same can be said of other material, e.g. dreams. It is true that where dream-material exists the analysis of these dreams is an all-important and essential part of our technique, and there are innumerable occasions when in spite of the patient's lack of interest in the matter it is necessary to seize on some fragment or other and subject it to detailed analysis. But in no case should the dream be taken apart from the context as if it were a tonsil capable of enucleation and subsequent dissection. Again, it is true that many dream-fragments can be very exhaustively analysed, but most attempts to aim at this thorough handling of *every* dream irrespective of the state of the analysis are liable to end in disappointment, and—what is more —will ultimately be turned to advantage as a resistance by patients who are prepared to deliver a postal packet of dreams at the beginning of each session, as if to say ' Now go ahead, my job is finished for the day '.

If we may look for more fundamental explanations of this ' anatomical ' attitude, it will be found to relate to some reluctance to appreciate the defensive functions of one's own mental apparatus, a difficulty in regarding the mind as a functioning instrument or organ. To take a further illustration, we may consider two ways of regarding any of the silent pauses which from time to time break the thread of analytic association. From the descriptive standpoint the silence may be regarded as a kind of artifact or flaw disturbing an experimental situation, a significant flaw, it is true, but somehow something *wrong with* the associations. If now we take the dynamic standpoint, it seems to me we have a much more vivid comprehension of the situation. What we have done in applying the association rule is to attempt to free an apparatus from certain inhibiting mechanisms, i.e. from secondary processes ; we are allowing the powerful drives and affective charges of the unconscious system to operate in as unhampered a way as possible during waking hours. A selective process is immediately set to work, and as soon as we who are listening have recognized the main theme we can follow it quite simply up to the point where the unconscious presentation comes too near the surface for the patient's ego : then comes the pause.

On a less wary day the train of thought might have ended in a sudden slip giving the keynote of the theme or at another time the unconscious theme of the association would be seen openly illustrated in some fragment of a reported dream. We have in fact been watching the operation of the pleasure principle, first, in so far as the id system has been given an opportunity of gaining open expression and, secondly, in so far as the ego has reacted to too open expression through one of its modes of defence, the evidence for which is the recurrence of a pause. Now, in the case of the suicidal patient I have described, the slips he produced could not be seized on immediately and analysed, for the reason that his ego had already shown signs of relative helplessness in dealing with id-excitations and, on the other hand, was obviously at the mercy of a strict super-ego. It seems to me that in such circumstances energies can for the moment be more advantageously directed, somewhat arbitrarily if need be, towards the analysis of whatever guilt-signals appear during the session. For purely practical reasons then my policy was to leave the slip and attack the punishing system. Of course this is an extreme case, not to be made the basis of a general rule, but in a sense the same sort of attitude is necessary in ordinary everyday analysis. Interpretation of unconscious phantasy material must as a rule be timed to take effect when the defensive systems (the primitive ego attitudes) have been really weakened.

Coming back once more to the attitude of the analyst, the first prerequisite of effective analysis is some comprehension of the structural organization of the mind, its function as a whole organ, the continuity of the function and the rough appropriateness of its methods of defence. The next is some appreciation of the fact that in any psycho-analysis we are not approaching this actively operating mental structure as the pathologist approaches the post-mortem platter, or as the biochemist conducts experiments *in vitro*. Nor indeed can we say that we are about to study this mental organ in the way that the cardiologist watches a heart in a state of auricular flutter, or a radiologist follows the course of a bismuth meal. We are about to initiate the development of a special situation, to regulate its course and bring it to a termination. Our main generalization is, then, that a *process of psycho-analysis is essentially a situation which develops along the same general lines in all cases but has individual form.*

But we cannot escape altogether the descriptive method of regarding this situation, so we may go on at once to say that *it is a situation capable of loose division into theoretical stages*. Each of these statements

is a necessary check on the other, since tendencies exist either to regard analysis as a form of therapeutic *interference* for which the analyst is mostly responsible, or on the other hand to see it as a rigid phenomenon with cut-and-dried stages which must be gone through according to plan, as it were an obstetrical situation with the analyst as midwife. Both of these points of view arose naturally during the development of psycho-analytic technique. The early cathartic phase and a good deal of the period of complex-hunting and interpretation accord simply with the view of therapeutic *interference from without*. Closer study of transference-manifestations, including the phenomena of repetition and re-enactment of memories, working through, etc., brought with it a clearer idea of the ' transference-neurosis ', by which is meant the re-staging of the neurotic conflict in analysis and in relation to the analyst. By this time the idea of an analytic ' situation ' had developed, and concurrently our views of ego-structure were greatly expanded by Freud's researches on the nature of the ego-ideal or super-ego. The inevitable result was that, whilst psycho-analytic technique was freed from the usual clinical preconception of interference, it has been at times hampered by theoretical views about stages and by preconceptions in regard to ego-structure.

At this point we must make a brief incursion into theory. As has always been the case, understanding of libido-development has been in advance of our knowledge of ego-structure ; hence it is easy to illustrate the organization of views of analytic technique from the libido point of view. Here analytic processes fall easily into three phases—(*a*) *the development of the transference ;* (*b*) *the transference-neurosis ;* (*c*) *the solution of the transference.* But the moment one begins to examine different ways in which this hypothetical first stage develops in practice, it is obvious that another mode of classification is equally possible and almost as essential, viz. : an ego-classification. For example, one patient commences with every sign of freedom, talks easily and fluently ; another talks easily and fluently with occasional sudden indications of stickiness, sudden relapses into silence, etc. ; a third starts slowly, haltingly and with every sign of difficulty ; a fourth can hardly be prevailed on to speak at all. Sooner or later we shall find in all of these evidence of similar mechanisms of defence, but there is obviously a sign here of different attitudes of the ego to the process of association. The fluent and halting types illustrate this difference most simply. But the difference can be noted in one and the same person. The second type I have mentioned, and of course all

patients at some time or another, talk freely and in a seemingly objective way, but are suddenly reduced to uneasy silence, as a rule without knowing why. Here it is evident that there are at least two ego-attitudes to be considered, of which one is not fully understood in consciousness. We now know that this second attitude is one taken up by the ego in obedience to the dictates of a special ego-institution, the super-ego. It is not proposed to deal here with questions of ego-structure : all we need to keep in mind about the super-ego is (i) that it is an institution built up in the ego on the model of previously external relations between parent and child ; (ii) that this introjected parental institution continues to exercise supervision over instinct-impulse, is, so to speak, a sampling department for inner excitation ; (iii) that, having delivered judgement, it depends for execution of that judgement on borrowed forces : it operates through the ego ; (iv) that its operation is for the greater part unconscious. To come back to the case of the patient who suddenly becomes silent, it is evident that the silent pause implies a sudden change in the attitude of the ego in obedience to instruction received from the super-ego, in spite of the fact that in most instances both instruction and compliance, the whole process in fact, have taken place apart from consciousness, which is presented with a *fait accompli*. At a later date we shall have occasion to consider how this among other difficulties has to be dealt with during analysis. To continue for the moment with the super-ego, we know what part it plays in relation to symptom-formation in the psycho-neuroses, how at its bidding the ego attempts to deal in some defensive way or other (e.g. repression, reaction-formation, regression) with id-impulses, how the ego is left in the lurch with insufficient forces at its disposal and makes a compromise which permits a return of the repressed in the disguised form of a symptom. Without going further into detail, we can see that, in addition to a libidinal classification of phases, different stages of analysis could be indicated by reference to the ego or to that special institution the ego-ideal. To return to the sudden silence, we have to consider not only the nature of the repressed excitation associated with the silence, but the attitude of the super-ego to such excitations and the capacity of the ego to obey the super-ego's bidding. It is easy to see that both the super-ego's attitude and the ego's obedience are based on antiquated systems of adaptation, and that an essential part of the treatment relates to uncovering this archaic unconscious attitude of the super-ego, tracing the factors in the child-parent relationship which has led to this particular set of attitudes, and so

freeing the ego from the necessity of carrying out various defence-manœuvres. In other words, we might subdivide the process of analysis in accordance with ego-standards. Thus *the first stage would be one of relaxing the archaic severities and watchfulness of the super-ego, the second the analysis of super-ego development and structure, and the third preparation of the ego to effect widened or unaccustomed adaptations, to hold unfettered the balance between inner tension and external release.*

So far we have considered the subdivision of analytic processes from the theoretical point of view, but it is easy to shew that these points of view are no mere abstractions. Within the past few years we have seen both tendencies illustrated in the views and technical suggestions of psycho-analytic writers. We may consider briefly two examples: first, the views at one time expressed jointly by Ferenczi and Rank, and the conception formulated by Alexander. The former regarded analysis as a process within the libido-development of the patient having individual form. They divided it more or less rigidly into stages: one in which libido is withdrawn from the ego-outposts (character, personality, etc.) and is concentrated in the analytic situation; the second when concentration is completed and infantile libido is expanded and worked through in the transference; and the third where the ego is weaned from the new libidinal situation and turned to reality. You can see that this is mainly a libidinal subdivision, although ego-factors are obviously taken into account in considering the processes of resistance in each stage. But the result of taking this point of view was reflected in the analytic procedure suggested by the authors. In the first stage a certain amount of 'activity' was necessary to call in libido; in the second, expansion of infantile libido involved the use of prohibitions and observances; and in the third an arbitrary period was set for the termination of analyses, which constituted a final weaning and during which the process of fresh adaptation to reality had to be encompassed.

We are not concerned here with the validity of active procedure or justification for it; as you may know, Ferenczi has modified his terminal technique in some respects, whilst Rank has proceeded towards extreme amplification of his 'birth technique'. All we need note here is how this theoretical division into stages can be made to serve two purposes: (*a*) to justify the introduction of additional technical procedure or of a fresh technique, and (*b*) to meet the desire for some formula which might enable analysis to be shortened.

Coming now to Alexander's views, the first of these is that he sets

his measure by ego-standards. Libidinal factors are of course taken into account, but the main aim of psycho-analytic technique is expressed in terms of ego-organization. The super-ego is an anachronism in the mental apparatus. It deals with instinct by an archaic reaction-system, which has most of the adaptation drawbacks of a reflex action. It must therefore be the aim of analysis to remove this anachronistic organization, and to make the ego take over the functions of the super-ego. This is carried out in two stages : by virtue of the transference the original childhood-relationship, as the result of which the super-ego was formed, is reproduced in analysis and the analyst is made to play the part of the super-ego to the patient's id. So far the patient has no great objection ; in fact he is distinctly relieved, and begins to permit expression of barred instinct tendencies. These are ventilated but, instead of being gratified, are brought into genetic relationship with infantile memories or reconstructions. At this point the second stage has already commenced : the ego is being educated to normal libido-control. This is where the real resistance commences : it is evidenced by a series of regressions but these same regressions throw light on the processes of formation of the super-ego, and have to be analysed through before the patient is ready to live a free and unaided existence.

Once more we have no immediate concern with the accuracy of these views ; we have, however, to note that in taking this ego-standpoint Alexander is free from any necessity to relate his analyses to stages of more or less fixed duration. He has also, I imagine, bound himself not to play the part of the super-ego during the stage when the patient projects this rôle on him ; i.e. he can ventilate and corrollate but not gratify, so that by implication any recourse to active measures of whatever kind should be limited to his last stage, and moreover it would seem that his disintegration of the super-ego promises lengthy analyses. However this may be, I think that to some extent he might be said to limit his technical freedom of action by his theoretical views. Now the burden of all these theoretical considerations is simply this : that *whilst the existence of a special analytic situation is common to all conceptions of the analytic process, in the present state of our knowledge we are under no immediate obligation to measure this by rigid standards.* I would go further and say that whilst it is important to have more general understanding of different phases and their characteristic or prevailing mechanisms, it is a positive obstacle to the success of one's first analyses to commence studying the situation with too rigid pre

conceptions as to their form and course. If practice consisted solely of classical transference-neuroses it might be possible to do so, but even then the method would have all the inaccuracies of a diagrammatic representation, or the disadvantages of studying ethnographic relations by means of a political map. Besides it neglects the essentially labile nature of the processes concerned. Take for example the modification or, if we prefer the theory, the disintegration, of the super-ego. It is clear that this process, which is generally associated with the later developments of analysis, has commenced from the very first day. The encouraging impersonality of the analyst and his absence of reaction to preconscious or other material is at least an open invitation to fresh introjection on the part of the patient. Never in the latter's experience has such a unique relationship existed for him. Take again the fact that, whilst our early work is mostly by way of establishing free association, we can never abandon this method up to the very last moment of analysis. We are prepared to find in the last regressional defences of analysis the same mechanisms functioning as in earlier uncovering of positive instinctual drives. Indeed, one of the main advantages of having a bird's-eye view of stages in analysis is that we may be able to distinguish between different causes for mental defence-functioning.

At any rate, if for the sake of convenience we carry in our mind a loose skeletal structure on which to deck out or extend the analytic situation, we must be constantly prepared to revise our judgements. One occasionally hears the comment: ' I analysed so and so's castration-complex thoroughly and yet the other day he or she showed quite active castration-reactions '. Now apart from the theoretical consideration that where a castration ' complex ', so-called, has been thoroughly analysed, the neurotic kernel has been for the most part resolved, this attitude will serve to illustrate the point of view I am presenting. On the one hand, the analyst may have been misled into thinking that the gist of the matter has been uncovered, in which case he must revise his estimates and continue the process of working through. On the other hand, he may be in the right and his patient may be playing up by regression, in order to stave off approaching termination of analysis. In many cases it is difficult to be certain, and in such instances the analyst will be on safe ground if he takes the first view. At any rate he will by so doing avoid the somewhat fretful assumption that at a certain stage of analysis it is positively inconsiderate of the patient to have any castration remainders.

To return once more to the question of attitude, this must be one of expectant interest in situations which, although they have much in common, unfold in a great variety of unanticipated ways. I think perhaps the difficulty of the diagrammatic or anatomical view of analysis, which has so many natural attractions, can be neutralized by cultivating *a sense of movement*. The phrase is inadequate in many respects, but it corresponds roughly to our view of the dynamic forces and regulations of instinctual flow.

And here I think we may bring forward one last consideration which should affect our attitude to analysis, viz. an appreciation of the silent strength of these same instinctual forces. In *The Ego and the Id* Freud compares the relationship of the ego and the id with that of a rider astride a horse. He was of course careful to emphasize the original identity of the systems, the ego being a highly specialized part of the id, but the comparison is one of great significance to the commencing analyst. The late Dr. James Glover used to say many years ago that the attitude of an analyst to his case should be that of an onlooker who sees a baby perched on an elephant, trying to convince itself that it is master of the situation, yet compelled to give terrified acquiescence to any change of direction initiated by the more powerful locomotive force beneath it. The application of this is twofold: it is creative of analytic understanding to regard the ego as a dependent organization, and one is well-advised to treat the instinctual drives of the id with some of the respect and caution which is traditionally accorded to the 'rogue' elephant.

II

THE OPENING PHASE

Since the consultation (or interview) which is a necessary prelude to actual work epitomizes the whole analytic situation and method, we may with advantage consider it in some detail. What distinguishes it from the ordinary consultation is the fact that we permit and encourage the patient to tell his own story. The clinician, in his anxiety to clinch the diagnosis of organic disease, can afford sometimes to keep his patient 'to the point' and remain indifferent to the psychological tension he thereby produces. The latter, more often than not, goes off in a semi-explosive state of suppression. At the very most, his own views and theories have been met with indulgent indifference, and he resents bitterly the tacit assumption that his relation to the disease in question is simply that of a carrier. In the analytic consultation, apart

from non-committal social gambits, the first real move is up to the patient, and many useful deductions may be drawn from his bearing, mannerisms and the order in which the story unfolds. But in the consultation, especially when it is essential to arrive at some immediate diagnosis, we can see that some interference is necessary. The patient has been unconsciously repenting his temerity ever since he rang the bell, and we may be sure that there will be a good deal of condensation, displacement and secondary elaboration in his statement of the case. A few leading questions will usually serve to uncover the existence of symptoms or peculiarities or conflicts, as far as it is necessary or possible to do so. Even where an interview with a parent is a preliminary to actual consultation with a child, and where one is free to go into the whole question, it is advisable to adopt the same attitude, to encourage free association, following this up by more inspired stimuli. The results of the passive attitude can be quite amusing. A mother recently interviewed me with a view to examining her daughter, who had had a chequered school career. The case presented quite a serious reality problem, and the history as she related it indicated apprehensions on the part of various school authorities concerning the girl's sexual development and practices. I drew her attention to this in the later part of the interview with no result. Next morning a letter arrived stating that she had forgotten to tell me the girl had contracted the habit of masturbation. Generally speaking, where the diagnosis can be easily made or where a case is transferred after examination by another analyst, it is unnecessary to begin digging for history. Nevertheless I think it is advisable as a prelude to the first session's analysis of all transferred cases, to hold a brief, formal consultation in which patients are asked to indicate their reasons for coming to be analysed. This procedure will help to modify to some slight extent the patient's reading of the transfer, i.e. that the analyst is a second-rate makeshift. In any case the usual details as to fees and appointments will then be considered. Here again it will save a good deal of trouble later if very precise indications are given : e.g. the principle of ' letting ' one's time irrespective of actual attendances by the patient, the length of the session if that should vary, the question of a fixed or varying hour of attendance, the extent of holiday breaks. On these and all similar points it is well to have a settled policy, and on the whole I would make this suggestion to those starting to fill up their time-table : within reasonable limits decide and act as if your time-table were as full as you would like it to be. By so doing you will throw into relief any

tendency to subjective motivations. After all, whether your time is fully occupied or not, you are going to be told in hostile moments by would-be 'only children' that they shrewdly suspect you have only one patient.

The ideal attitude in consultation is, then, to get the patient to talk and only to speak oneself when it is necessary to elicit further information in order that one may decide on his suitability for analysis. A certain amount of explanatory conversation may be unavoidable, but it should be reduced to a minimum. When the patient is already in possession of some information concerning the nature of analysis, it is usually possible to conclude the interview without going into any technical matters. But in some instances a patient may submit the analyst to a searching cross-examination as to the method of analysis. This is of course an anxiety-attitude, and our policy should be to give some general information calculated to meet this anxiety for the moment, but as far as possible not to go into technical details which later on will be turned to disadvantage when the patient begins to 'resist'. The reason for this procedure is not so much that for all practical purposes it is universally adopted by consultants, but that in analysis it is exceedingly important to get fresh impressions of the patient's reaction to the analytic situation. Early explanations simply result in blurred impressions.

There is, however, one question which is almost invariably propounded by the patients, usually when the subject of fees is broached: how long will the analysis last? As we shall see later, this is a point on which the analyst himself may be subject to unconscious bias. As far as the patient's interests are concerned, there are only three possible replies. Either we say that we do not know, or we say that we do not know but that if the matter is urgent we can give them a rough indication after some weeks' analysis, or we say that, whilst we do not know, they ought at least to budget for a minimum period. This last is the most unsatisfactory of the replies: the minimum indicated can only be determined by our rough-and-ready diagnosis. We may, for example, tell an anxiety-hysteric that with reasonable progress the case may require a minimum of nine to twelve months, but suppose we find later that there are some psychotic mechanisms underlying the hysteria, the estimate will be entirely falsified, and will be made a subject of reproach or depreciation by the patient. Nevertheless we may be compelled to give some such estimate, in which case it must be given subject to qualification. If they go on to demand reasons, it is

easy to show patients that they are asking the impossible. After all, this is an occasion when we can learn much from the consultant who is approached on the subject of organic disorder. Of course the latter is considerably assisted by the fact that sufferers from organic illness, to begin with, at any rate, desire to be treated until they are cured, and it does not usually occur to them to stipulate as to the length of the doctor's attendance. If they do so inquire, if, for example, a consumptive in the early stages of his disease asks how long his treatment may last, the doctor knowing that in the early stages no prognosis can be arrived at may promise to give a rough opinion in six *months* (not weeks). His experience tells him that at the best he may have to mortgage his patient's time for the whole of one year and the greater part of two subsequent years, but he also knows that at the end of five years his patient may still be under treatment and still with a favourable prognosis ; or again that at the end of ten years he may be watching a fatal termination. So without a shade of uneasiness or a qualm of conscience he consults his patient's interests best by giving a guarded prognosis and ample warning of the provisory nature of these estimates. The psycho-analyst can do no better than follow his example.

Assuming now that the formalities are completed and that the patient is about to be ushered in for the first analytic session, no sooner does the door open than we are presented with our first problem in technique. How are we to greet him ? Shall we shake hands or not ? The decision is not perhaps momentous, but it involves consideration of certain principles. One at least, that of counter-transference and resistance, we can delay for an appropriate occasion : all we need say at present concerning the analyst is that there are individual and temperamental differences in attitude which make for elasticity in formulating guiding rules. As regards the patient, we have to remember that the significance of a handshake is very different for an hysterical, an obsessional or a depressed case. In fact it might be said that the deeper the patient's regression or the earlier the fixation, the more significant do such details of analytic behaviour become. For the hysteric a handshake may be a promise, for the obsessional a challenge, for the narcissistic type it may be an attack. On the whole it is advisable to omit the procedure, at any rate with all who show negativistic reactions, and in most cases not to have too formal a leave-taking at the end of the session. After a period of emotional stimulation, a patient may reasonably hope to leave the room unembarrassed by any procedure reminiscent of scrutiny. With these reservations the

matter is one for individual inclination and tact. Whatever course is adopted, it is essential that it should be consistently carried out. An exception to this rule would exist where the analyst thought that the transfer of affect to the analytic situation was insufficient, that the patient tended to make the whole affair as impersonal as possible. He could then intimate that in future he intended shaking hands. As you can see, this involves the principle of ' active ' therapy and must be considered later. Otherwise consistency of demeanour is essential during all periods when the analyst is, as it were, under observation, i.e. at the beginning, end of and, in case of interruption, during the session. The tendency of hysterical types is to make a convenience of these preliminary moments by easing their burden of phantasy before free association on the couch has commenced. Certain elements are automatically projected on to the analyst, and it will be found that these serve at the same time the purpose of giving dramatic representation to unconscious wishes. This is not so apparent at the very beginning of an analysis, but sooner or later the session's work will begin with comments of this sort, ' Why did you look at me in that peculiar way when I came in ' or ' What have I done that you should frown at me . . . ' or ' look severely ' . . . or ' appear worried '. . . . The fact is, of course, that the patient is really frowning at himself, lessening internal conflict, by reconstructing a situation in which the parent taxes the child with guilty conduct. But it is more than a mere projection : the patient is also dramatizing an erotic phantasy, in this case of a masochistic sort. The parent has frowned at (attacked, punished, loved) the child. Obsessional types do not as a rule indulge this play with the analyst as object quite so openly ; nevertheless it will be found that either in the waiting-room, or on entry to the analytical room, or on the way to the couch fragmentary phrases or compulsive words or mental comments on some arrangement of the room flit across their minds, to be followed up by a silent pause on lying down. Narcissistic cases give the impression that only an earthquake would momentarily deflect their attention from the purpose in hand, but this may be a false impression. Actually you will find that their attention is often deflected by some isolated object in the room, and that during later association their minds are ceaselessly busy in an undercurrent of speculation about it. On occasion the march to the couch may itself be interrupted. One patient was in the habit of walking boldly and erectly to the couch, stopping on the way to warm one hand (partly paralysed) at the fire. He did so regularly, until once too frank a gesture was given by his id ;

having warmed the hand, he straightened himself up and began to march boldly out of the room, caught himself half-way and, with a furtive sidelook at the analyst, literally slunk on to the couch. Another was at first with difficulty induced to lie down : his preliminary protest took the form of strolling to the fireplace, warming himself leisurely, beaming on me with benevolent eyes and propounding the solicitous inquiry, ' Well, how are things ? ' My first response was a non-committal noise, the next step was a series of explanations on succeeding days, and the third a policy of silent observation which finally wore down his affable obstinacy. Even then he was by no means ' on ' the couch in the literal sense ; his right foot was firmly planted on the floor, giving him a reassuring sense of security. He had not abandoned *terra firma*, and should it be necessary to bolt he had at least a good take-off. But I was content for the moment with having reduced his conscious dallying on the hearth-rug : the couch position could wait until a later occasion. *A patient need not be harried ; there is an absorption-point for all cases ; to exceed this is unnecessary, usually superfluous and sometimes inadvisable.*

Once the patient is on the couch we lose no time in explaining the nature of analytic procedure, making him acquainted with the fundamental rule that he shall say whatever comes into his mind, irrespective of emotional or other valuation. Having stated this quite explicitly in the plainest terms, we may in most cases await events. In some instances, however, it may be worth while to expound the rule briefly by means of some simple comparison of the usual type, e.g. an imagined experiment in which someone is asked to describe to a blindfolded geologist the view as seen from a carriage window, when obviously the omission of any feature on grounds of triviality or lack of æsthetic attraction might prejudice the accuracy of the indirect geological survey. *It is scarcely an exaggeration to say that from the moment the fundamental rule has been expounded to the patient and has been ostensibly accepted by the latter, a large part of the analyst's work will up to the last moment consist in an endeavour to circumvent its evasion.* Evasion tendencies are of course more apparent in the earlier stages, and we may well proceed now to discuss some varieties, particularly those which call for action on the part of the analyst. We may consider first those individuals who seem to take to the method like a duck to water. They plunge straight into the matter and associate to all appearance in a commendably free manner. Or, consciously guided by some preconceptions of analytic aims, they produce an elaborate autobiographical

record ; or again, evidently on the assumption that possession is nine points of the law, they endeavour to ensure that there will be no analytic nonsense about their analysis by seizing the reins, combining a free output of associative material with a seemingly detached survey of what they have just produced in terms of the latest analytic theory with which they are familiar. This is all very well and good, and there is no immediate necessity to interfere : sooner or later the id will have some say or ego-defences will become apparent. Indeed, the first indication for the necessity of early interference in such cases is mainly a negative one, i.e. where the flow of associations continues uninterruptedly *without* any such signs. There is also a positive indication ; it is a sort of eddy in the current of association, where the patient after covering a certain amount of ground begins, as it were, to chase his own tail, talks quite as fluently, but brings no additional grist to the mill. But even if we decide not to interfere for the moment we may legitimately draw some deductions for future reference, or at any rate make some mental notes of interrogation. Of these the indications of a positive attitude, submissiveness, amiability, etc., are less important than the hostile tendencies they cloak. We have to consider the play of narcissistic tendencies, the hostility to analytic method implied in biographical recital, the attempt by doing their own analysis to hoist the analyst with his own petard, to out-Herod Herod. We may draw preliminary deductions as to the relative importance of certain phases of pre-genital development, e.g. the urethral erotic implications of certain loquacious types, the anal implications of any tendency to round off each session with a completed narrative. Having done all this, we may mentally check these deductions by considerations of another kind. *We must observe the amount of affect accompanying the associations.* Obsessional types we shall soon find weaving interminable circumlocutions proceeding in a series of loops, and at the same time touching on certain intimate matters with a seemingly detached air as if immune from any emotional implications. Narcissistic cases, on the other hand, although exhibiting a tendency to anchor round a stereotyped set of associations, display from time to time a considerable amount of feeling. Hysterical types are so free in expression of affect that they can scarcely be said to illustrate the difficulty we are considering at present, viz. the difficulty of fluent and effortless association. As we shall see later, their associations are punctuated with emotional asterisks, and we are never left very long in doubt about the necessity of coming to their assistance. One particular type of case

may however give rise to some confusion, i.e. where hysterical manifestations are superimposed on narcissistic ego fixation. Here we may observe a process of circling in associations, which must be given more scope than in the instances previously described. Those patients' ego systems are less tolerant of phantasy products, and the circling represents an attempt not only to distribute the affective charge more widely but to deal with it by a process of repetition, to which we shall pay more attention when considering the process of ' working through '. To come back to the matter in hand, it is important to check all our preliminary observations of the nature of associative material by an estimate of the amount of affective discharge. Needless to say, we acquire the habit of making these estimates in all cases, but it is essential to do so where we have reason to conclude that the patient is adopting the policy of the ' stay-in strike '.

So far we have considered the difficulty presented by too easy association. We may now turn our attention to those patients who find the association technique a stumbling block and who either appeal for assistance, or without asking for help proceed in a dumb, driven sort of way from halt to halt. Now in regard to offering assistance, two things have to be remembered : the first is that in some way or another all patients coming to be analysed require assistance. The second is a precautionary consideration. All patients, in their unconscious anxiety to be freed from the discomfort of free association, may be depended upon to try turning the tables on the analyst, and this will be achieved if they can get him to abrogate his own rule, making it easy when it is plainly *not* easy, talking when *they* wish to be silent or encouraging them at the beginning to follow up some line of thought which appears analytically promising. The difficulty is to combine these points of view. Of course it is clear that the only real assistance one can give is that of accurate interpretation at the appropriate moment, but at the commencement of analysis the opportunities for deep interpretation are few and far between. What we are more concerned with is the necessity to ' get them going '. When one is asked innocently ' How shall I begin ? Shall I tell you the story of my life ? ' etc., the answer is easy : ' If you care, *begin* to do so provided you *continue* the narrative in accordance with the rule '. This they will soon find is not a very material concession, and all so-called concessions which automatically set the rule in operation may be included under the heading of legitimate advances in difficult cases. But how are we to judge of true difficult cases. Roughly speaking, there are two standards, (1) where

you come to the conclusion that the patient is suffering from acute anxiety and apprehension, and (2) where there is evidence of ego-disorder, as for example in marked depression. In any case one should not too readily weaken the strength of one's own position, which lies in listening, even to silences. In the average case more will be gained by waiting, with at the most monosyllabic encouragement to speak. Incidentally the encouraging ' Yes ' should be reserved for occasions when encouragement is called for and when it is appreciated. Patients are quick to spot a parental tolerance (or impatience) behind the superfluous ' Yes ' and to resent what they regard as pure smugness of outlook.

Now there are certain cases which seem to defy all rules and where decision as to the course to pursue is exceedingly difficult. These are the cases sent under duress, frequently though not always minors, also some alleged ' character '-cases, where the main indications seem to have been a negativistic incapacity for adaptation, leading to clashes with various authorities. Here one may be compelled to come out into the open and the problem is : along what line should one advance ? But first of all, what are the most important factors operative in such instances ? I think it is agreed that they are twofold, the intensity of guilt-feeling and the ' instability ' of ego-ideal or super-ego formations. Such patients preserve themselves from anxiety and conflict by a sort of massive projection, the guilt-situations are cloaked behind real contingencies, the punishment is distributed between the self and external objects, but appears to be initiated by external objects.

We can see that such a patient has every unconscious reason to fight shy of analysis, that this combination of unconscious guilt-feeling and hostility will produce the most obstinate of all resistances, and that in some respects this ego-organization has a dangerous resemblance to that of the psychotic. Our policy must then be to abandon the expectant method we adopt in less difficult cases and at the earliest moment to alleviate the more immediate manifestations of guilt, following this up by interpretations of unconscious phantasy, which we should otherwise delay until a more favourable moment. In the first instance we direct our attention to the patient's unconscious *ego attitudes*, focussing them in consciousness, whilst in the second we deal with the *phantasy material* which provokes these attitudes. Here we have our first hint of the difference between ego-analysis and libido analysis. Now the manifestations of guilt may be easy to demonstrate from the patient's varying reaction to different types of preconscious material, or, as is

more often the case, his guilt is cloaked by a mechanism of projection. In the latter instance all we have to go on is direct or indirect evidence of hostility to the analyst. Having ventilated the hostility, we must then demonstrate its defensive significance, going on to indicate what appears to us to be the most immediate source of unconscious guilt.

But what if the patient doesn't speak, or hardly speaks at all? What is one to do? Now here is an investigation which is open to all comers irrespective of experience. I cannot profess to indicate any solution. My own practice is to start in the usual way, but on the appearance of difficulty to be a little more explanatory and encouraging, coming, as it were, part of the way to meet advances, but returning at once to the passive attitude when any advance is made. Failing any progress, the choice then seems to lie between making our explanations more and more interpretative, emphasizing their attitude of defensive hostility to ourselves, and at the same time pointing out the infantile sources of this attitude. Or, adopting the method which has been used so successfully with children by Melanie Klein, we can use the direct interpretative method, translating into unconscious terms whatever fragmentary ideas are presented to us, or in the absence of spoken associations, any actions or lack of action which we may be able to observe. The difference between these methods is really only quantitative, a matter of graduated dosage. In Mrs. Klein's method we are less dependent on the spoken word, but success in both policies depends on the accuracy of our transference interpretations. In any case, whether we proceed gradually to deep interpretation or have immediate recourse to transference interpretation of heavily charged unconscious attitudes, the main point is that we should in the opening phases never get too far away from the passive expectant attitude. All that I have dealt with so far is the extent to which we may depart from it in order to 'get things going'.

Now it will naturally occur to you to ask, *à propos* of the last case, 'Why not tell him he is resisting? Obviously there must be some strong hostility underlying his attitude to association'. The reason I have not mentioned the word so far is partly one of convenience, viz. that I hope to give a general view of resistance under the caption of defence. But there is also a practical reason. It is quite true that the difficulties presented at the beginning of analysis are resistances: as Freud has said, 'Anything that interferes with the course of analysis is a resistance'. But to say to a patient at the outset of analysis that he is resisting is not only to focus his attention on a theoretical concept

before he can understand it ; it is an attempt to remove an obstruction by means of a cliché. One might as well say to someone who blinks his eye in a sandstorm, ' Your conjunctival reflex is working, please keep your eyes open '. After all it is the function of the ego-system to resist, and indeed one of the indications that we must be on the outlook for resistances is the fact that no signs of resistance appear : e.g. the case of fluent associating. In fact it pays to fight shy of using technical terms at any time in the analysis. The result of using them is usually to provide a few more toys for the constant process of word-play which all patients indulge in to some degree. An accurate interpretation is much more effective than a reference to ' resistance ', which is usually felt to be an accusation. The explanations we give at the commencement of analysis should where possible embody some interpretation along with reassurance, and it is here that the usual methods of expressing early unconscious defence can be ventilated. Theoretical conceptions are necessary, but may be employed with more effect when a whole position has been uncovered and when it is convenient to assemble the multitudinous representatives of a complex or defensive mechanism. I would suggest that the word ' complex ' or the use of special nomenclature such as ' the castration complex ' should, if at all, be used only when we are ready to demonstrate the meaning and purpose of the particular complex.

Up till now we have been occupied solely with examples of special difficulty which may arise at the beginning of analysis, and have neglected to pay any attention to opening phases of an uneventful type. Experience gained from the study of difficult cases stands us in good stead, however, in the handling of ordinary types. It is rare to find a patient proceeding quite smoothly through the opening phase up to the point when transference difficulties arise. Observation shows us that the same mechanisms are at work as in refractory patients, and making due allowance for difference in degree, the same methods are used in overcoming obstacles. When the flow of association is choked by embarrassment, we share with the patient the discovery of a new or reinforced ego attitude. We reverse a projection here or explain an identification there. When after stumbling utterances on, let us say, the subject of masturbation, the patient dwells on the obnoxious characteristics of authoritative figures in his environment, their tendency to unwarranted interference or unfair criticism, we are able to relate these reactions to the immediate stimulus, to touch on the defensive side of hostile reactions to ourselves, and to connect hostility with

anxiety. These are of course interpretations and operate as such, but we have not been under the necessity of making deep interpretations of unconscious phantasy, and the patient is reassured by what he regards as encouraging explanations. This, for the moment, is the effect we wish to produce. Each explanation should give just the right amount of impetus, should guide the patient deeper into the current of spontaneous association, before he has the opportunity of taking fright and darting back to the bank in a state of suspicious and hostile panic.

It is now high time to take stock of the analytic situation. How far have we progressed and what have been the mechanisms involved? We will assume that either spontaneously or as the result of our assistance the patient has been 'got going'. We may assume further that he keeps going for some time. What has he given us and what are we to do about it? I think we may take it that the patient has unburdened himself of a considerable amount of preconscious material, has presented us with a considerable number of 'screen-memories', and has shown us a specific tendency to '*drift*' in some direction or another. On the other hand, this 'drift' may have been indicated in a negative sort of way. Let us take, for example, manifestations of the castration complex. From the beginning we may have observed that whilst the first part of the session has been characterized by general tendencies, the end has persistently dealt with ideas of injury, mutilation, imperfection, feelings of hopelessness or pointlessness, and so on. We may have observed that whenever one association pointed in any of these directions, a pause recurred or an obvious switch in the associations was made. But though we may already have suspected all this at the actual consultation or first interview, our main objective has been the free expression of this material. It is not yet time to drive home the persisting psychic reality of such situations; indeed we cannot do so in any convincing way until that position has been established which we shall describe under the heading of 'transference neurosis'. But you will legitimately ask, 'Have there been no signs of transference already?' Most assuredly: the decision to arrange a consultation was in itself evidence of a transference situation, and at that consultation the decision to undergo analysis was affected by earlier and immediate transferences, which were, on the balance, of a positive nature. Patients with a predominantly negative transference may go so far under the original impetus as to arrange for analysis, but are liable to write a week later postponing the step on various rationalized grounds. They never come back.

When the actual analysis begins the balance of positive transference of a spontaneous sort, the ' floating ' positive, we might say, has enabled us to get through many of the initial difficulties, and our interpretative labours have been directed largely towards manifestations of the ' floating ' negative. These are very vague and elastic terms, and there is no essential distinction between transferences in earlier and later stages, but I feel convinced that *the first crisis in analysis occurs at the time when these preliminary transferences merge in an imperceptible way with the transference of affect brought about specifically by the analytic situation and its fundamental rule.* At this point symptoms may improve, sometimes disappear, or previous signs of hostility may begin to exacerbate ; in fact, it is at this point that analyses are often broken off. A patient may feel better, seem to have gained his objective and goes his way in seemingly grateful rejoicing ; or he may find that he wants to get married and must save up ; or he establishes some unconscious homosexual attachment and finds analysis ' very interesting,' but of no great moment. Or he finds that he wishes to take up a fresh occupation precluding his attendance at analysis ; or he feels that his symptoms have a purely physiological basis which requires priority of attention. He may in short produce some one or other of the many forms of diverting libido from the analytic situation, and, in default of these, simply indicates that he will no longer continue his attendance. Such patients provide some of the most interesting material for reflection and investigation, quite sufficient to compensate for any tendency on the part of the commencing analyst to regard his career as shattered. After all he can take comfort from at least one consideration ; he has been prepared to go on. He has not had resort to those large gestures of defeat beloved by his clinical colleagues. He has not sent his patient on a voyage or to the country, or brought his difficulties to a head by roundly abusing his patient's tardiness in recovery.

At this point I feel myself considerably hampered by the necessity of compressing into a brief space, a description of *movement* in analysis, and at the same time of taking sufficient cognizance of practical difficulties. I want to suggest to you the main purpose of the opening movement, viz. to set the analytic situation going, to remove obstacles from the progress of association, to permit unconscious drives to influence selectively the flow of ideas, to watch in what way the patient's pleasure-principle tends to operate. At the same time I should like to defer for a later date a systematic consideration of

defences, in order that we may get a grip of the essential identity of various defensive functions. The obvious risk is that I may give the impression of underrating the early defences. For example, when I say that there is a critical point in the opening phase of analysis, I do not intend to suggest that the crisis cannot be avoided or overcome, as if the analyst had nothing else to do but to set the wheels agoing, remove obvious pieces of grit and trust to luck for the rest. In many cases the work done in furthering association will in itself be sufficient to carry the patient over the first stile, and perhaps it might be said that the optimum amount of interference in the opening phase is that which keeps the associations going and at the same time ventilates the defensive hostility to analysis (and therefore to the analyst) produced by the progress of associations. But in a varied analytical practice we have to budget for every variety of refractory case, especially for patients whose defences to analysis are almost but not quite insuperable. Other conditions being equal, i.e. there having been no marked change in the patient's libidinal *milieu,* these cases should get over their first difficulties without breaking away, but this implies certain analytic dispositions on our part. I think we may safely say that the exceptional cases we have already described as presenting difficulty with the association technique at the beginning of analysis are not as a rule likely to give so much difficulty at this critical phase. As we shall find in discussing resistances generally, it is fairly true to say that the toughest and most effective resistances are silent. In the case of the first group the manifestations of resistance are in fact extremely noisy ; in the second group they are liable to be overlooked on account of their silent activity. It is often the case that at the beginning of analysis we have no valid criticism to make of the operation of the association technique. The patient is neither too ready nor too inhibited. He talks on the whole freely ; but we have the feeling that the entire process is artificial, that he is as it were setting his teeth to carry out an experiment and that he is determined that the experiment will fail, though from no ostensible fault of his. But if we examine the situations depicted in his associations, we see that although they have to do mainly with current or recent observations, they represent some common attitude and that is an attitude of anxiety, as if preparing to ward off some danger. Or again, the general themes are of a kind which if closely examined are found to deal mainly with situations of submission, authority and discipline. To take a third example : the type of association may be beyond reproach, yet there

are various minor indications that the patient is tentatively trying to see how far he can go in subverting the analytical routine. He innocently inquires how far some previously projected journey will interfere with some future appointments or whether accommodation will be made by the analyst in case of office difficulties and so on.

Now the attitude of the analyst in the face of the last-mentioned situation is perfectly clear. His diagnosis and recommendation of treatment was an earnest of his view that the first necessity for the patient was psycho-analysis, and he must be adamantine in maintaining the attitude that analysis must always come first. But to be adamantine does not imply that one must throw disciplinary brickbats at the patient's head. Any formulations of this sort must be accompanied by an analytical explanation of the source of these resistances. And this enables us to amplify our description of the analyst's objective during the first phase of analysis. He has not only to get things going and deal with immediate obstacles, but he has to keep in mind that the whole of his patient's preliminary attitude to analysis is a natural exhibition of defence against the arousing of anxiety. Now the process of analysis, by giving free scope to unconscious presentation, is *a priori* calculated to stimulate all the possibilities of unconscious anxiety. This is only in part allayed by the favourable conditions present in analysis and by the non-critical attitude of the analyst, and where the general signs indicate that the patient is burdened by extreme neurotic anxiety, it is our policy to come forward with explanations which will tend to relieve him. In other words, if a patient should break off analysis during the opening phase, the more accurate description is not, ' he was too resistant ' or ' narcissistic ', but rather, ' his anxieties were too acute '.

You will observe then that, roughly speaking, there are two groups of difficult cases to be studied in the opening phase: (1) those who present immediate difficulty in commencing analysis, and (2) those who may seem to be quite amenable to the analytic process, but after a varying period show quite vigorous defensive reactions and are liable to break off. I am aware that this is a very inadequate classification, and one in which no cognizance is taken of mixed types of reaction. But I hope that it will throw into some relief the main problems of the opening phase. On the whole, once the members of the first group have been got going they will give less trouble until the transference-neurosis threatens to develop, and on the whole, provided we have been awake to their earlier unobtrusive defence-reactions, the second group can be tided over their critical phase.

But it is time to return to the average case in which no such violent manifestations are indicated, and to consider what period will elapse before the floating positive (or primary impetus) will exhaust itself. It would be unsafe to pin oneself down to an actual period, often it seems to last from a few weeks to a few months. It is difficult to say, for the reason that it constitutes only one factor in the situation; obviously the degree of subjective discomfort, the narcissistic enjoyment of self-expression and many other factors contribute here. I think, too, it may vary in extent in accordance with the amount of success which the patient has achieved in his unconscious playing up to the analytic situation and the strength of the impression he has formed, rightly or wrongly, of the analyst's determination to keep unswervingly to the purposes of free association. As you can imagine, there is no hurry to resist if no immediate danger is scented by his unconscious ego.

It is increasingly difficult to keep the word 'resistance' out of this discussion; one can scarcely mention any of the factors which operate in the opening phase without immediately thinking of a type of resistance originating from the same source. And when we start thinking of *one* type, we can see more or less conclusive evidence of the operation of every other type. Nevertheless it is quite reasonable to expect that if we talk of an opening phase we should be ready to indicate not only what the most important mechanisms are, but also which mechanisms are most likely to get out of gear during that phase.

I would suggest that there are two main factors operative in the opening stage. The first we have already mentioned in reference to the critical phase, the allaying of anxiety, and the second is the influence of the analytic situation in modifying the super-ego. The spontaneous allaying of anxiety is essentially related to a parental situation in analysis; the patient is in a sense in safety, and is encouraged to let affect and idea run together. It is unique in the sense that he is never given false reassurance; for the first time in his life, he has not been pooh-poohed, and becomes gradually familiar with an attitude which later on becomes displeasing, viz. that he has some *psychically real* cause for anxiety. Later on, he will himself begin to pooh-pooh the idea, will tell you that he never really felt so ill as he said, will tell you that you are on a false trail if you think he has anything else to conceal, and will adopt every conceivable ruse to write down the whole theory of psychic reality. But at first, driven by the inconveniences of a fettered ego, he is on your side.

The second factor, viz. the modification of the ego-ideal, also implies a parental situation, but is even more strikingly unique in another sense. For the first time in his life the patient can speak of the innermost concerns of his mind before a parental image that does not swoop on him with direct or implied reproof and correction. Further, even those matters to which he at first refuses house-room in his own consciousness, or which induce in him the strongest feelings of self-reproach, are treated in the same way. The analyst will not play the parental game, either when it is anticipated with distaste and dread or when it is eagerly sought after. In other words, he will imitate neither the external objective parent nor that to which the patient has given allegiance in his own mind, i.e. his super-ego. The patient for his part appreciates the one attitude but resents the other, nevertheless the result of a quiet maintenance of the analyst's attitude gradually bears fruit, and as the process of identification develops we are faced with partial accomplishment of one of the first necessities in analysis, a modification of the patient's ego-ideal. I say partial advisedly, because the real task is yet to come ; the modification requires to be deep and lasting, and this is not possible until the actual development of this ego-ideal has been unfolded in a real situation in the patient's analysis.

Now as to the specific resistances manifested in the first stage, it may be said that, in the general sense of repression, they are typical ego-resistances ; in so far as they are concerned with guilt-feelings, however, they have a specific relation to the super-ego—probably many of the immediate resistances to analysis are of the super-ego type. But it will be remarked : are not all resistances ego-resistances ? That is of course true in the sense that they operate or manifest themselves through the ego, but from the point of view of origin we have to learn that in the course of analysis at least five different types of general resistance can be observed. To these we must next turn our attention.

(*To be continued.*)

SYMPOSIUM ON CHILD-ANALYSIS [1]

I

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I will begin my remarks with a short retrospect of the development of child-analysis in general. Its beginnings date from the year 1909, when Freud published the 'Analysis of a Phobia in a Five-year-old Boy'. This publication was of the greatest theoretical importance, confirming as it did in the person of the child who was its subject the truth of what Freud, proceeding from the analysis of adults, had discovered to exist in children. The paper had, however, yet another significance, the greatness of which could not at that time at all be gauged. This analysis was destined to be the foundation-stone of subsequent child-analysis. For not only did it show the presence and the evolution of the Œdipus complex in children and demonstrate the forms in which it operates in them; it showed also that these unconscious tendencies could safely and most profitably be brought into consciousness. Freud himself describes this discovery as follows [2]: 'But I must now inquire what harm was done to Hans by dragging to light in him complexes such as are not only repressed by children but dreaded by their parents. Did the little boy proceed to take some serious action as regards what he wanted from his mother? or did his evil intentions against his father give place to evil deeds? *Such misgivings will no doubt have occurred to many doctors, who misunderstand the nature of psycho-analysis and think that wicked instincts are strengthened by being made conscious*'. [3]

And again, on p. 285: 'On the contrary, the only results of the analysis were that Hans recovered, that he ceased to be afraid of horses and that he got on to rather familiar terms with his father, as the latter reported with some amusement. But whatever his father may have lost in the boy's respect he won back in his confidence: "I thought", said Hans, "you knew everything as you knew that about the horse". For analysis does not undo the *effects* of repression. The instincts which were formerly suppressed remain suppressed; but the

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[1] Held before the British Psycho-Analytical Society, May 4 and 18, 1927.

[2] *Collected Papers*, Vol. III., p. 284.

[3] The italics are mine.

same effect is produced in a different way. Analysis replaces the process of repression, which is an automatic and excessive one, by a temperate and purposeful control on the part of the highest mental faculties. In a word, *analysis replaces repression by condemnation*. This seems to bring us the long-looked-for evidence that consciousness has a biological function, and that with its entrance upon the scene an important advantage is secured '.

H. Hug-Hellmuth, who had the honourable distinction of having been the first to undertake the systematic analysis of children, approached her task with certain preconceptions in her mind, which she also retained to the last. In her paper entitled ' On the Technique of Child-Analysis ', written after four years' work in this field, which gives us the clearest idea of her principles and her technique,[4] she makes it very clear that she deprecated the idea of analysing very young children, that she considered it necessary to content oneself with ' partial success ' and not to penetrate too deep in analysis with children, for fear of stirring up too powerfully the repressed tendencies and impulses or of making demands which their powers of assimilation are unable to meet.

From this paper, as well as from her other writings, we know that she shrank from penetrating at all deeply into the Œdipus complex. Another assumption to which she held in her work was that in the case of children not only analytic treatment but also a definite educative influence is required of the analyst.

As early as 1921, when I published my first paper ' The Development of a Child ',[5] I had arrived at very different conclusions. In my analysis of a boy of five and a quarter I found (what all my later analyses confirmed) that it was perfectly possible and also salutary to probe the Œdipus complex to its depths and that by so doing one could obtain results at least equal to those of adult analysis. But, side by side with this, I found out that in an analysis so conducted not only was it unnecessary for the analyst to endeavour to exert an educative influence but that the two things were incompatible. I took these discoveries as the guiding principles in my work and advocated them in all my writings, and this is how I have come to attempt the analysis of quite little children, that is, from three to six years old, and to find it both successful and full of promise.

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[4] This JOURNAL, Vol. II., 1921.

[5] Translated in this JOURNAL, Vol. IV., 1923

Let us now first of all select from Anna Freud's book what seem to be her four principal points. Here we meet again with the fundamental idea which we have already mentioned as being also H. Hug-Hellmuth's, namely, the conviction that the analysis of children should not be pressed too far. By this, as is clear also from the more immediate conclusions drawn, is meant that the child's relation to the parents should not be too much handled, that is, that the Œdipus complex must not be searchingly examined. The examples which Anna Freud gives do in fact show no analysis of the Œdipus complex.

The second leading idea is, here again, that the analysis of children should be combined with exerting an educational influence upon them.

It is remarkable and should give food for thought that, though child-analysis was first attempted some eighteen years ago and has been practised ever since, we have to face the fact that its most fundamental principles have not yet been clearly enunciated. If we compare with this fact the development of adult psycho-analysis we shall find that, within a similar period of time, all the basic principles for the latter work were not only laid down but were empirically tested and proved beyond refutation, and that a technique was evolved the details of which had certainly to be perfected but whose fundamental principles have remained unshaken.

What is the explanation of the fact that just the analysis of children should have been so much less fortunate in its development? The argument often heard in analytical circles that children are not suitable objects for analysis does not seem to be valid. H. Hug-Hellmuth was indeed very sceptical about the results to be obtained with children. She said she 'had to content herself with partial success and also to reckon with relapses'. Moreover she restricted the treatment to a limited number of cases. Anna Freud also sets very definite limits to its applicability, but on the other hand she takes a more optimistic view than did H. Hug-Hellmuth of the potentialities of child-analysis. At the end of her book she says: 'In child-analysis, in spite of all the difficulties I have enumerated, we do bring about changes, improvements and cures such as we dare not even dream of in analysing adults' (p. 86).

In order to answer the question I have suggested, I want now to make certain statements which it will be my business to prove as I go on. I think that child-analysis, as compared with that of adults, has developed so much less favourably in the past because it was not

approached in a spirit of free and unprejudiced enquiry, as adult analysis was, but was hampered and burdened from the outset by certain preconceptions. If we look back at that first child-analysis, the foundation of all others (that of little Hans), we discover that it did not suffer from this limitation. Certainly there was as yet no special technique : the child's father who carried out this partial analysis under Freud's directions was quite unversed in the practice of analysis. In spite of this he had the courage to go quite a long way in the analysis and his results were good. In the summary to which I referred earlier in this article Freud says that he himself would have liked to go further. What he says shows, too, that he did not see any danger in a thorough analysis of the Œdipus complex, so evidently he did not think that this complex should on grounds of principle be left unanalysed in children. But H. Hug-Hellmuth, who for so many years was almost alone and certainly pre-eminent in this field of work, approached it from the outset with principles which were bound to limit it and therefore make it less fruitful, not only in respect of its practical results, the number of cases in which analysis was to be used, etc., but also in respect of theoretical findings. For, during all these years, child-analysis, which might have reasonably been expected to contribute directly to the development of psycho-analytical theory, has done nothing in this direction worth speaking of. Anna Freud, as well as H. Hug-Hellmuth, has the idea that in analysing children we can discover not only no more, but actually *less* about the early period of life than when we analyse adults.

Here I come upon another pretext which is put forward as a reason for the slow progress made in the field of child-analysis. It is said that a child's behaviour in analysis is obviously different from that of an adult, and that therefore a different technique must be used. I think this argument is incorrect. If I may adapt the saying, ' It is the spirit which builds the body ', I should like to maintain that it is the attitude, the inner conviction which finds the necessary technique. I must reiterate what I have said : if one approaches child-analysis with an open mind one will discover ways and means of probing to the deepest depths. And then, from the results of the procedure one will realize what is the child's *true nature* and will perceive that there is no need to impose any restriction on the analysis, either as to the depth to which it may penetrate or the method by which it may work.

In what I have now said I have already touched on the principal point in my criticism of Anna Freud's book.

A number of technical devices employed by Anna Freud may, I think, be explained from two points of view : (1) she assumes that the analytic situation cannot be established with children ; and (2) in the case of children she regards pure analysis without any pedagogic admixture as unsuitable or questionable.

The first thesis follows directly from the assumption of the second.

If we compare this with the technique of adult analysis, we perceive that we assume unconditionally that a true *analytic* situation can be brought about only by *analytic* means. We should regard it as a grave error to ensure for ourselves a positive transference from the patient by employing measures such as Anna Freud describes in Chapter I. of her book, or to utilize his anxiety in order to make him submissive, or otherwise to intimidate or win him over by means of authority. We should think that even if such an introduction as this secured for us partial access to the patient's Ucs, we yet could never expect to establish a true analytic situation and to carry through a complete analysis which should penetrate the deeper layers of the mind. We know that we constantly have to analyse the fact that patients wish to see us as an authority—whether a hated or a loved one—and that only by analysing this attitude do we gain access to these deeper layers.

All the means which we should regard as incorrect in the analysis of adults are specially stressed by Anna Freud as valuable in analysing children, the object being that introduction to the treatment which she believes to be necessary and which she calls the ' breaking-in ' to analysis. It would appear obvious that after this ' breaking-in ' she will never wholly succeed in establishing a true analytic situation. Now I think it surprising and illogical that Anna Freud, who does not use the necessary measures to establish the analytic situation but substitutes others at variance with these, yet continually refers to her assumption, and tries to prove it theoretically, that it is *not possible* to establish an analytic situation with children nor, therefore, to carry through with them a pure analysis in the sense of adult analysis.

Anna Freud gives a number of reasons to justify the elaborate and troublesome means which she considers it necessary to employ with children in order to bring about a situation which shall make analytic work possible. These reasons do not seem to me sound. She departs in so many respects from the proved analytic rules, because she thinks that children are such *different* beings from adults. Yet the sole purpose of all these elaborate measures is to make the child like the

adult in his attitude to analysis. This seems contradictory and I think is to be explained by the fact that in her comparisons Anna Freud puts the Cs and the ego of the child and the adult in the foreground, while we (though we give all necessary consideration to the ego) surely have to work first and foremost with the Ucs. But in the Ucs (and here I am basing my statement on deep analytical work with both children and adults) the former are by no means so fundamentally different from the latter. It is only that in children the ego has not yet attained to its full development, and therefore they are very much more under the sway of their Ucs. It is this which we must approach and this that we must regard as the central point of our work if we want to learn to know children as they really are and to analyse them.

I do not attach any special value to the goal which Anna Freud so ardently strives after—that of bringing about in children an attitude towards analysis analogous to the attitude of adults. I think, too, that if Anna Freud does attain this goal by the means which she describes (and this can be only in a certain limited number of cases) the result is not that towards which her work is directed but something very different. The ' acknowledgment of illness or of naughtiness ' which she has succeeded in awaking in the child emanates from the anxiety which she has mobilised in him for her own purposes : castration-anxiety and the sense of guilt. (I will not here go into the question how far in adults too the reasonable and conscious desire to get well is simply a façade screening this anxiety.) With children we cannot expect to find any lasting basis for our analytic work in a conscious purpose which, as we know, even in adults, would not long hold firm as the sole support for the analysis.

Anna Freud too, it is true, thinks that this purpose is necessary in the first instance as a preparation for the work, but she further believes that, when once the purpose is there, she can rely upon it as the analysis progresses. I think this idea is mistaken and that whenever she appeals to this insight she is really having recourse to the child's anxiety and sense of guilt. In itself there would be nothing objectionable about this, for feelings of anxiety and guilt are undoubtedly most important factors in the possibility of our work. Only I think it necessary for us to be clear *what* are the supports upon which we are relying and *how* we are using them. Analysis is not in itself a gentle method : it cannot spare the patient *any suffering*, and this applies equally to children. In fact, it must force the suffering into consciousness and bring about abreaction if the patients are to be spared per-

manent and more fatal suffering later. So my criticism is not that Anna Freud *activates* anxiety and the sense of guilt, but on the contrary that she does not *resolve* them *sufficiently*. It seems to me an unnecessary harshness towards a child when, as for instance she describes on p. 9, she brings into his consciousness the anxiety lest he should go mad, without immediately attacking this anxiety at its unconscious roots and thus as far as possible allaying it again.

But if it is really to feelings of anxiety and guilt that we have to appeal in our work, why should we not regard these two as factors to be reckoned with and work with them systematically from the outset ?

I myself always do this, and I have found that I can place complete reliance in a technique which goes on the principle of taking into account and working analytically with the quantities of anxiety and of feelings of guilt which are so strong in all children and are much clearer and more easily laid hold of than in adults.

Anna Freud states (p. 56) that a hostile or anxious attitude towards me in a child does not justify me in concluding immediately that there is a negative transference at work, for ' the more tenderly a little child is attached to his own mother, the fewer friendly impulses are left in him for strangers '. I do not think we can draw a comparison, as she does, with tiny infants who reject what is strange to them. We do not know a great deal about tiny infants, but it is possible to learn a great deal from an early analysis about the mind of a child of, say, three years old, and there we see that it is only very ambivalent neurotic children who manifest fear or hostility towards strangers. My experience has confirmed my belief that if I construe this dislike at once as anxiety and negative transference feeling, and interpret it as such in connection with material which the child at the same time produces and then trace it back to its original object, the mother, I can at once observe that the anxiety diminishes. This manifests itself in the beginning of a more positive transference and, with it, of more vigorous play. In older children the situation is analogous though it differs in detail. Of course, my method presupposes that I have from the beginning been willing to attract to myself the negative as well as the positive transference and, further, to investigate it to its source in the Œdipus situation. Both these measures are in full agreement with analytical principles, but Anna Freud rejects them for reasons which I think are unfounded.

I believe then that a radical difference between our attitudes to anxiety and a sense of guilt in children is this : that Anna Freud makes

use of these feelings to attach the child to herself, while I from the outset enlist them in the service of the analytic work. There cannot in any case be any very large number of children in whom one can stir up anxiety without its proving an element which will most painfully disturb or even make impossible the progress of the work, unless one immediately proceeds to resolve it analytically.

Anna Freud, moreover, as far as I can understand from her book, employs this means only in particular cases. In others she tries by every means to bring about a positive transference, in order to fulfil the condition, which she regards as necessary for her work, of attaching the child to her own personality.

This method, again, seems to me unsound, for surely we could work more certainly and more effectually by purely analytic means. It is not every child who responds to us from the beginning with fear and dislike. My experience bears me out when I say that if a child's attitude to us is friendly and playful we are justified in assuming that there is a positive transference and in at once making use of this in our work. And we have another excellent and well-tried weapon which we use in an analogous fashion to that in which we employ it in the analyses of adults, though there, it is true, we do not have so speedy and so plain an opportunity to intervene. I mean that we *interpret* this positive transference, that is, in both children's as in adults' analyses we trace it back to the original object. In general, we shall probably notice both the positive and the negative transference and we shall be given every opportunity for analytic work if we handle both from the outset analytically. By resolving some part of the negative transference we shall then obtain, just as with adults, an increase in the positive transference and this, in accordance with the ambivalence of childhood, will soon in its turn be succeeded by a re-emerging of the negative. Now this is true analytic work and an analytic situation has been established. Moreover, we have then found the basis upon which to build in the child itself, and we can often be to a great extent independent of a knowledge of its surroundings. In short, we have achieved the conditions necessary for analysis and not only are we spared the laborious, difficult and unreliable measures described by Anna Freud, but (and this seems even more important) we can ensure for our work the full value and success of an analyses in every sense equivalent to adult analysis.

At this point, however, I encounter an objection raised by Anna Freud in the second chapter of her book, entitled ' The means employed

in child-analysis '. To work in the way I have described we must get material from the child's associations. Anna Freud and I and probably everyone who analyses children agree that they neither can nor will give associations in the same way as grown-ups and so sufficient material cannot be collected by means of speech alone. Amongst the means which Anna Freud suggests as useful for making up for the lack of verbal associations are some which I too have found valuable in my experience. If we examine these means rather more closely—take, for instance, drawing, or telling day-dreams, etc.—we shall see that their object is to collect material in some other way than that of association according to rule, and that it is above all important with children to set their phantasy free and to induce them to phantasy. In one of Anna Freud's statements we have a clue, which must be carefully considered, as to how this is to be done. She states that ' there is nothing easier than to make children understand dream-interpretation '. And again (p. 31) ' even children of poor intelligence, who seemed in every other respect as unfit as possible for analysis, succeeded in dream-interpretation '. I think that these children would perhaps not have been so unsuitable for analysis at all if Anna Freud had made more use, in other ways as well as in dream-interpretation, of the understanding of symbolism which they so plainly manifested. For it is my experience that, if this is done, no child, not even the least intelligent, is unfit for analysis.

For this is just the lever which we must make use of in child-analysis. A child will bring us an abundance of phantasies if we follow him along this path with the conviction that what he recounts is symbolic. In Chapter III. Anna Freud puts forward a number of theoretical arguments against the play-technique which I have devised, at least when it is applied for the purpose of analysis and not merely of observation. She thinks it doubtful whether one is justified in interpreting the content of the drama enacted in children's play as symbolic and thinks that they might very likely be occasioned simply by actual observations or experiences of daily life. Here I must say that from Anna Freud's illustrations of my technique, I can see that she misunderstands it. ' If a child upsets a lamp-post or one of the figures in the game, she [Melanie Klein] interprets the action probably as due to aggressive tendencies towards the father, while, if the child makes two carts collide, it is construed as implying observation of parental coitus '. I should never attempt any such ' wild ' symbolic interpretations of children's play. On the contrary I emphasized this

very specially in my last paper.[6] Supposing that a child gives expression to the same psychic material in various repetitions—often actually through various media, i.e. toys, water, by cutting-out, drawing, etc.—and supposing that, besides, I can observe that these particular activities are mostly accompanied at the time by a sense of guilt, manifesting itself either as anxiety or in representations which imply over-compensation, which are the expression of reaction-formations—supposing, then, that I have arrived at an insight into certain connections : then I interpret these phenomena and link them up with the Ucs and the analytic situation. The practical and theoretical conditions for the interpretation are precisely the same as in the analysis of adults.

The little toys I use are only one means I provide ; paper, pencils, scissors, string, balls, bricks and, above all, water are others. They are at the child's disposal to use if he likes and the purpose of them all is simply to gain access to and to liberate his phantasy. There are some children who for a long time will not touch a toy or perhaps for weeks on end will only cut things out. In the case of children altogether inhibited in play the toys may possibly simply be a means of studying more closely the reasons for their inhibition. Some children, often the very little ones, as soon as the playthings have given them the opportunity of dramatizing some of the phantasies or experiences by which they are dominated, often put the toys aside altogether and pass on to every imaginable kind of game in which they themselves, various objects in my room and I have to take part.

I have gone into this detail of my technique at some length because I want to make clear the principle which, in my experience, makes it possible to handle children's associations in the greatest abundance and to penetrate into the deepest Ucs strata.

We can establish a quicker and surer contact with the Ucs of children if, acting on the conviction that they are much more deeply under the sway of the Ucs and their instinctual impulses than are adults, we shorten the route which adult analysis takes by way of contact with the ego and *make direct connection with the child's Ucs.* It is obvious that, if this preponderance of the Ucs is a fact, we should also expect that the mode of representation by symbols which prevails in the Ucs would be much more natural to children than to adults, in fact, that the former will be dominated by it. Let us follow them

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[6] This JOURNAL, Vol. VIII., 1927.

along this path, that is to say, let us come into contact with their Ucs, making use of its language through our interpretation. If we do this we shall have won access to the children themselves. Of course this is not all so easily and quickly to be accomplished as it appears ; if it were, the analysis of little children would take only a short time, and this is not by any means the case. In child-analysis, we shall again and again detect resistance no less markedly than in that of adults, in children very often in the form still the more natural to them, namely, in anxiety.

This, then, is the second factor which seems to me so essential if we wish to penetrate into the child's Ucs. If we watch the alterations in his manner of representing what is going on within him (whether it is that he changes his game or gives it up or that there is a direct onset of anxiety) and try to see what there is in the nexus of the material to cause these alterations, we shall be convinced that we are always coming up against the sense of guilt and have to interpret this in its turn.

These two factors, which I have found to be the most reliable aids in the technique of child-analysis, are mutually dependent and complementary. Only by *interpreting* and so *allaying* the child's anxiety whenever we can reach it shall we gain access to his Ucs and get him *to phantasy*. Then, if we follow out the symbolism that his phantasies contain, we shall soon see anxiety reappear, and thus we shall ensure the progress of the work.

The account given of my technique and the importance attributed by me to the symbolism contained in children's actions might be misconstrued as implying that in child-analysis one has to do without the help of free association in the true sense.

In an earlier passage of my paper I pointed out that Anna Freud and I and all of us who work at child-analysis are agreed that children cannot and will not associate in the same way as adults. I should like here to add that probably it is chiefly that children *cannot*, not because they lack the capacity to put their thoughts into words (to some degree this would apply only to quite small children), but because *anxiety* resists verbal associations. It does not lie within the scope of this paper to discuss this interesting special question in greater detail : I will just briefly mention some facts of experience.

Representation by means of toys—indeed, symbolic representation in general, as being to some extent removed from the subject's own person—is less invested with anxiety than is confession by word of

mouth. If, then, we succeed in allaying anxiety and in getting in the first instance more indirect representations, we shall be able to convince ourselves that we can elicit for analysis the fullest verbal expression of which the child is capable. And then we find repeatedly that at times when anxiety becomes more marked the indirect representations once more occupy the foreground. Let me give a brief illustration. When I had advanced quite a long way in the analysis of a five-year-old boy, he produced a dream the interpretation of which went very deep and was fruitful in results. This interpretation occupied the whole analytic hour, all the associations being *exclusively verbal.* On the two following days he again brought dreams which turned out to be continuations of the first. But verbal associations to the second dream could be elicited only with great difficulty and one at a time. The resistance was plain and the anxiety markedly greater than on the day before. But the child turned to the box of toys and by means of dolls and other play-things depicted for me his associations, helping himself out with words again whenever he overcame some resistance. On the third day the anxiety was even greater, on account of the material which had come to light on the two previous days. The associations were given almost exclusively by means of play with toys and water.

If we are logical in our application of the two principles that I have emphasized, namely, that we should follow up the child's symbolic mode of representation and that we should take into account the facility with which anxiety is roused in children, we shall be able also to count on their associations as a very important means in analysis, but, as I have said, only at times and as one means amongst several.

I think therefore that Anna Freud's statement is incomplete when she says : ' Every now and again, too, unintentional and involuntary associations come to our aid ' (p. 41). Whether associations appear or not depends quite regularly on certain definite attitudes in the analysand and in no way on chance. In my opinion we can make use of this means to a far greater extent than seems likely. Over and over again it bridges the gulf to reality, and this is one reason why it is more closely associated with anxiety than is the unreal, indirect mode of representation. On this account I would not regard any child-analysis, not even that of a quite little child, as terminated unless I could finally succeed in its being expressed in speech, to the degree to which the child is capable of this, and so of linking it up with reality.

We have then a perfect analogy with the technique of adult analysis.

The only difference is that with children we find that the Ucs prevails to a far greater extent and that therefore its mode of expression is far more predominant than in adults, and further that we have to take into account the child's greater tendency to anxiety.

But this is also very decidedly true of analysis during the latency and prepubertal periods and even to some extent during puberty. In a number of analyses in which the subjects were at one or other of these phases of development I was forced to adopt a modified form of the same technique as I use with children.

I think that what I have now said robs of their force Anna Freud's two main objections to my play-technique. She questioned (1) whether we were justified in assuming that the symbolic content of children's play is its main motive, and (2) whether we could regard children's play as equivalent to verbal association in adults. For, she argues, such play lacks the idea of purpose which the adult brings to his analysis and which 'enables him when associating to exclude all conscious directing and influencing of his trains of thought'.

To this latter objection I should like to reply further that these intentions in adult patients (which in my experience are not so effective as Anna Freud supposes even with them) are quite superfluous for children, and by this I do not mean very little children.

It is clear from what I have said that children are so much dominated by their Ucs that it is really unnecessary for them deliberately to exclude conscious ideas.[7] Anna Freud herself too has weighed this possibility in her mind (p. 49).

I have devoted so much space to the question of the technique to be employed with children because this seems to me fundamental in the whole problem of child-analysis. When Anna Freud rejects the play-technique her argument applies not only to the analysis of little children but also in my opinion to the basic principle of the analysis of

[7] I must go yet a step further. I do not think that the problem is to induce a child in the analytic hour 'to exclude all conscious directing and influencing of his trains of thought', but rather that we must aim at inducing him to recognize all that lies outside his Ucs, not only in the analytic hour, but also in life in general. The special relation of children to reality rests (as I shewed in greater detail in my last paper already quoted: 'The Psychological Principles of Infant Analysis') on the fact that they endeavour to exclude and repudiate everything which is not in accordance with their Ucs impulses, and in this is included reality in the broader sense.

older children, as I understand it. The play-technique provides us with a rich abundance of material and gives us access to the deepest strata of the mind. If we make use of it we arrive unconditionally at the analysis of the Œdipus complex, and once arrived, we cannot mark out limits for analysis in any direction. If then we really wish to avoid analysing the Œdipus complex we must not make use of the play-technique, even in its modified application to older children.

It follows that the question is not whether the analysis of children *can* go so deep as that of adults, but whether it *ought* to go so deep. To answer this question we must examine the reasons which Anna Freud gives, in Chapter IV. of her book, *against* penetrating so far.

Before we do this, however, I should like to discuss Anna Freud's conclusions, given in Chapter III. of her book, about the part played by the transference in child-analysis.

Anna Freud describes certain essential differences between the transference situation in adults and in children. She comes to the conclusion that in the latter there may be a satisfactory transference, but that no transference-neurosis is produced. In support of this statement she adduces the following theoretical argument. Children, she says, are not ready like adults to enter upon a new edition of their love-relations, because the original love-objects, the parents, still exist as objects in reality.

In order to refute this statement, which I believe to be incorrect, I should have to enter into a detailed discussion of the structure of the super-ego in children. But as this is contained in a later passage I will content myself here with a few statements which are supported by my subsequent exposition.

The analysis of very young children has shewn me that even a three-year-old child has left behind him the most important part of the development of his Œdipus complex. Consequently he is already far removed, through repression and feelings of guilt, from the objects whom he originally desired. His relations to them have undergone distortion and transformation so that the present love-objects are now *imagos* of the original objects.

Hence in reference to the analyst children can very well enter upon a new edition of their love-relations in all the fundamental and therefore decisive points. But here we encounter a second theoretical objection. Anna Freud considers that in analysing children the analyst is not, as he is when the patient is an adult, ' impersonal, shadowy, a blank page upon which the patient can inscribe his phantasies ', one who avoids

imposing prohibitions and permitting gratifications. But according to my experience it is exactly thus that a children's analyst can and ought to behave, when once he has established the analytic situation. His activity is only apparent, for even when he throws himself wholly into all the play-phantasies of the child, conforming to the modes of representation peculiar to children, he is doing just the same as the analyst of adults, who, we know, also willingly follows the phantasies of his patients. But beyond this I do not permit child-patients any personal gratifications, either in the form of presents or caresses or personal encounters outside analysis and so forth. In short, I keep on the whole to the approved rules of adult analysis. What I give to the child-patient is analytic help and relief, which he feels comparatively quickly even if he has not had any sense of illness before. Besides this, in response to his trust in me he can absolutely rely on perfect sincerity and honesty on my part towards him.

I must, however, contest Anna Freud's conclusion no less than her premises. In my experience a full transference-neurosis does occur in children, in a manner analogous to that in which it arises with adults. When analysing children I observe that their symptoms change, are accentuated or lessened in accordance with the analytic situation. I observe in them the abreaction of affects in close connection with the progress of the work and in relation to myself. I observe that anxiety arises and that the children's reactions work themselves out on this analytic ground. Parents who watch their children carefully have often told me that they have been surprised to see habits, etc., which had long disappeared come back again. I have not found that children work off their reactions when they are at home as well as when with me : for the most part they are reserved for abreaction in the analytic hour. Of course it does happen that at times, when very powerful affects are violently emerging, something of the disturbance becomes noticeable to those with whom the children are associated, but this is only temporary and it cannot be avoided in the analysis of adults either.

On this point, therefore, my experience is in complete contradiction to Anna Freud's observations. The reason for this difference in our findings is easy to see : it depends on the different way in which she and I handle the transference. Let me sum up what I have already said. Anna Freud thinks that a *positive* transference is a necessary condition for all analytic work with children. She regards a negative transference as undesirable. ' In the case of children ', she writes, ' it

is especially inconvenient to have negative tendencies directed against the analyst, in spite of the light they may throw on many points. We shall endeavour to demolish or modify them as soon as possible. The really fruitful work will always be done when the attachment to the analyst is positive ' (p. 51).

We know that one of the principal factors in analytic work is the handling of the transference, strictly and objectively, in accordance with the facts, in the manner which our analytic knowledge has taught us to be the right one. A thorough resolution of the transference is regarded as one of the signs that an analysis has been satisfactorily concluded. On this basis psycho-analysis has laid down a number of important rules which prove necessary in every case. Anna Freud sets aside these rules for the most part in child-analysis. With her the transference, the clear recognition of which we know to be an important condition of our work, becomes an uncertain and doubtful concept. She says that the analyst '*probably* has to share with the parents the child's love or hate ' (p. 56). And I do not understand what is intended by ' demolishing or modifying ' the inconvenient negative tendencies.

Here premises and conclusions move in a circle. If the analytic situation is not produced by analytic means, if the positive and the negative transference are not handled logically, then neither shall we bring about a transference-neurosis nor can we expect the child's reactions to work themselves out in relation to analysis and the analyst. Later in this paper I will deal with this point more thoroughly, but at present I will just briefly sum up what I have already said by stating that Anna Freud's method of attracting the positive transference by all possible means to herself and of lessening the negative transference when it is directed against herself seems to me not only technically incorrect but, in effect, to militate far more against the parents than my method. For it is only natural that the negative transference will then remain directed against those with whom the child is associated in daily life.

In her fourth chapter Anna Freud comes to a number of conclusions which seem to me again to display this vicious circle, this time specially clearly. The term ' vicious circle ' I have explained elsewhere as meaning that from certain premises conclusions are drawn which are then used to confirm those same premises. As one of the conclusions which seem to me erroneous I would instance Anna Freud's statement that in child-analysis it is impossible to surmount

the barrier of the child's imperfect mastery of speech. It is true she makes a reservation : ' As far as my experience goes up till now, with the technique I have described '. But the very next sentence contains an explanation of a general theoretical nature. She says that what we discover about early childhood when we are analysing adults ' is revealed by these very methods of free association and interpretation of the transference-reactions, i.e. by those means which fail us in child-analysis '. In various passages in her book Anna Freud stresses the idea that child-analysis, adapting itself to the child's mind, must alter its methods. Yet she bases her doubts of the technique which I have evolved on a number of theoretical considerations, without having submitted it to a practical test. But I have proved by practical application that this technique helps us to get the child's associations in even greater abundance than we get in adult analysis and thus to penetrate far deeper than we can in the latter.

From what my own experience has taught me, then, I really can only emphatically combat Anna Freud's statement that both the methods used in adult analysis (namely, free association and the interpretation of the transference-reactions), in order to investigate the patient's early childhood, fail us in analysing children. I am even convinced that it is the special province of child-analysis, particularly that of quite young children, to make valuable contributions to our theory, just because with children analysis can go far deeper and therefore can bring to light details which do not appear so clearly in the case of adults.

Anna Freud compares the situation of an analyst of children with that of an ethnologist ' who should try by contact with a primitive people to acquire information about prehistoric times more easily than by studying the civilized races ' (p. 66). This again strikes me as a theoretical statement which contradicts practical experience. The analysis of little children, as well as that of older children if it is carried far enough, gives a very clear picture of the enormous complexity of development which we find even in very little ones and shews that children of the age of, say, three years, just because they are already so much the products of civilization, have gone and are going through severe conflicts. To keep to Anna Freud's illustration, I should say that precisely from the standpoint of research a children's analyst finds himself in a fortunate situation which is never vouchsafed to an ethnologist, namely that of finding the civilized people in closest association with the primitive and, in consequence of this rare association,

of receiving the most valuable information about both the earliest and later times.

I will now deal in greater detail with Anna Freud's conceptions of the child's super-ego. In Chapter IV. of her book are certain statements which have special significance, both because of the importance of the theoretical question to which they relate and also because of the wide conclusions which Anna Freud draws from them.

The deep analysis of children, and particularly of little children, has led me to form quite a different picture of the super-ego in early childhood from that painted by Anna Freud principally as a result of theoretical considerations. It is certain that the ego of children is not comparable to that of adults. The super-ego, on the other hand, approximates closely to that of the adult and is not radically influenced by later development as is the ego. The dependence of children on external objects is naturally greater than that of adults and this fact produces results which are indisputable, but which I think Anna Freud very much over-estimates, and therefore does not rightly interpret. For these external objects are certainly not identical with the already developed super-ego of the child, even though they have at one time contributed to its development. It is only thus that we can explain the astonishing fact that in children of three, four or five years old we encounter a super-ego of a severity which is often in the sharpest contradiction to the real love-objects, the parents. I should like to instance the case of a four-year-old boy whose parents have not only never punished or threatened him but who are really unusually kind and loving. The conflict between the ego and the super-ego in this case (and I am taking it only as one example of many) shews that the super-ego is of a phantastic severity. On account of the well-known formula which prevails in the Ucs this child anticipates, by reason of his own cannibalistic and sadistic impulses, such punishments as castration, being cut to pieces, eaten up, etc., and lives in perpetual dread of them. The contrast between his tender and loving mother and the punishment threatened by the child's super-ego is actually grotesque and is an illustration of the fact that we must on no account identify the real objects with those which children introject.

We know that the formation of the super-ego takes place on the basis of various identifications. My results shew that this process, which terminates with the passing of the Œdipus complex, i.e. with the beginning of the latency period, commences at a very early age.

In my last paper I have indicated, basing my remarks on my findings in the analysis of very young children, that the Œdipus complex ensues upon the deprivation experienced at weaning, that is, at the end of the first or the beginning of the second year of life. But, hand in hand with this, we see the beginnings of the formation of the super-ego. The analyses both of older and of quite young children give a clear picture of the various elements out of which the super-ego develops and the different strata in which the development takes place. We see how many stages there are in this evolution before it terminates with the beginning of the latency period. It is really a case of *terminating*, for, in contrast to Anna Freud, I am led to believe from the analysis of children that their super-ego is a highly resistant product, at heart unalterable, and is not essentially different from that of adults. The difference is only that the *maturer ego* of adults is better able to come to terms with their super-ego. This, however, is often only *apparently* the case. Further, adults can defend themselves better against those authorities which represent the super-ego in the outside world; children are inevitably more dependent on these. But this does not imply, as Anna Freud concludes, that the child's super-ego is still 'too immature, too dependent on its object, spontaneously to control the demands of the instincts, when analysis has got rid of the neurosis'. Even in children these objects—the parents—are not identical with the super-ego. Their influence on the child's super-ego is entirely analogous to that which we can prove to be at work on adults when life places them in somewhat similar situations, e.g. in a position of peculiar dependence. The influence of dreaded authorities in examinations, of officers in military service, and so forth, is quite comparable to the effect which Anna Freud perceives in the 'constant correlations in children between the super-ego and the love-objects, which may be likened to those of two vessels with a communicating duct'. Under the pressure of those situations in life such as I have mentioned, or others similar to them, adults, like children, react with an increase in their difficulties. This is because the old conflicts are reactivated or reinforced through the harshness of reality, and here a predominant part is played precisely by the intensified operation of the super-ego. Now this is exactly the same process as that to which Anna Freud refers, namely, the influencing of the (child's) super-ego by objects still actually present. It is true that good and bad influences on character and all the other dependent relations of childhood exert a stronger pressure on children than is under-

gone by adults. Yet in adults too such things are undoubtedly important.[8]

Anna Freud quotes an example (pp. 70–71) which she thinks illustrates particularly well the weakness and dependence of the claims of the ego-ideal in children. A boy in the period of life immediately preceding puberty, when he had an uncontrollable impulse to steal, found that the highest agency which influenced him was his fear of his father. She regards this as a proof that here the father who actually existed could still be substituted for the super-ego.

Now I think that quite often we can find in adults similar developments of the super-ego. There are many people who (often all through their lives) ultimately control their asocial instincts only through fear of a ' father ' in a somewhat different guise : the police, the law, loss of caste, etc. The same is true too of the ' double morality ' which Anna Freud observes in children. It is not only children who keep one moral code for the world of adults and another for themselves and their boon companions. Many grown-ups behave in just the same way and adopt one attitude when they are alone or with their equals, and another towards superiors and strangers.

I think that one reason for the difference of opinion between Anna Freud and myself on this very important point is the following. By the super-ego I understand (and here I am in complete agreement with what Freud has taught us of its development) the faculty which has resulted from the Œdipus development through the introjection of the Œdipus objects, and, with the passing of the Œdipus complex, has assumed a lasting and unalterable form. As I have already explained, this faculty, both during its evolution and still more when it is completely formed, differs fundamentally from those objects which really initiated its development. Of course children (but also adults) will set up all kinds of ego-ideals, installing various ' super-egos ', but this surely takes place in the more superficial strata and is at bottom determined by that one super-ego which is firmly rooted in the child and

[8] In *Psycho-analytische Studien zur Charakterbildung* (Internationaler Psychoanalytischer Verlag, Leipsic, Vienna, Munich) Abraham says (ss. 57–58) : ' But the dependence of character-traits on the general fate of the libido is not confined to one particular period of life but is universally valid for the whole of life. The proverb ' *Jugend kennt keine Tugend* ' [Youth knows no virtue] voices the fact that at a tender age character is immature and lacking in firmness. We should, however, not over-estimate the stability of character even in later years.'

whose nature is immutable. The super-ego which Anna Freud thinks is still operative in the persons of the parents is not identical with this inner super-ego in the true sense, though I do not dispute its influence in itself. If we wish to reach the real super-ego, to reduce its power of operation and to influence it, our only means of doing so is analysis. But by this I mean an analysis which investigates the whole development of the Œdipus complex and the structure of the super-ego.

To return to Anna Freud's illustration which I mentioned before. In the boy whose highest weapon against the onslaught of his instincts was his fear of his father we encounter a super-ego which was certainly immature. I would rather not call such a super-ego typically ' childish '. To take another example : The four-year-old boy of whom I reported that he suffered from the pressure of a castrating and cannibalistic super-ego, in complete contrast to his kind and loving parents, has certainly not only this one super-ego. I discovered in him identifications which corresponded more closely to his real parents, though not by any means identical with them. These figures, who appeared good and helpful and ready to forgive, he called his ' fairy papa and mamma ', and, when his attitude towards me was positive, he allowed me in the analysis to play the part of the ' fairy mamma ' to whom everything could be confessed. At other times—always when the negative transference was reappearing—I played the part of the wicked mamma from whom everything evil that he phantasied was anticipated. When I was the fairy mamma he was able to make the most extraordinary demands and gratify wishes which could have no possible fulfilment in reality. I was to help him by bringing him as a present, in the night, an object which represented his father's penis, and this was then to be cut up and eaten. That he and she should kill his father together was one of the wishes which the ' fairy mamma ' was to gratify. When I was the ' fairy papa,' we were to do the same sort of things to his mother, and, when he took over the rôle himself and I enacted that of the son, he not only gave me leave to have coitus with his mother but gave me information about it, encouraged me and also shewed me how the phantasied coitus could be performed with the mother by father and son simultaneously. A whole series of most varied identifications, which were in opposition to one another, originated in widely different strata and periods and differed fundamentally from the real objects, had in this child resulted as a whole in a super-ego which actually gave the impression of being normal and well developed. An additional reason for selecting this case from many analogous ones

is that it was that of a child who would be called *perfectly normal* and who was having analytic treatment only for prophylactic reasons. It was only after we had done analysis for some time and the development of his Œdipus complex had been probed to the depths that I was able to recognize the complete structure and the different parts of this child's super-ego. He shewed the reactions of a sense of guilt on a really high level ethically. He condemned anything that he regarded as wrong or ugly in a manner which, while appropriate to the ego of a child, was analogous to the functioning of the super-ego of an adult on a high ethical level.

The development of the child's super-ego, but not less that of the adult, depends on various factors which need not here be discussed in greater detail. If for any reason this development has not been fully accomplished and the identifications are not wholly successful, then anxiety, in which the whole formation of the super-ego originated, will preponderate in its functioning.

The case which Anna Freud quotes does not seem to me to prove anything but that such developments of the super-ego exist. I do not think it shews that this is an instance of a specifically childish development, for we meet with the same phenomenon in those adults in whom the super-ego is undeveloped. And so I think that the conclusions which she draws from this case are erroneous.

What Anna Freud says in this connection gives me the impression that she believes the development of the super-ego, with reaction-formations and screen-memories, to take place to a large extent during the period of latency. My analytic knowledge of little children forces me to differ from her quite definitely on this point. My observations have taught me that all these mechanisms are set going when the Œdipus complex arises and are activated by that complex. With its passing they have accomplished their fundamental work ; the subsequent developments and reactions are rather the super-structure on a substratum which has assumed a fixed form and persists unchanged. At certain times and in certain circumstances the reaction-formations are accentuated, and, again, when the pressure from without is more powerful, the super-ego will operate more powerfully.

These, however, are phenomena which are not peculiar to childhood.

That which Anna Freud regards as a further extension of the super-ego and reaction-formations in the periods of latency and immediately before puberty is simply an apparent outward adaptation to the pres-

sure and requirements of the outside world, and has nothing to do with the true development of the super-ego. As they grow older, children (like adults) learn how to handle the ' double moral code ' more skilfully than little children who are as yet less conventional and more honest about things.

Let us now pass on to the deductions which the author makes from her statements about the dependent nature of the super-ego of children and their double moral code in relation to the emotions of shame and disgust.

On pp. 73–75 of her book Anna Freud argues that children differ from adults in this respect: that when the child's instinctual tendencies have been brought into consciousness the super-ego by itself should not be expected to assume complete responsibility for their direction. For she believes that children, left to themselves on this point, can only discover ' a single short and convenient path, namely, that which leads to direct gratification '. Anna Freud is reluctant—and gives good reasons for her reluctance—that the decision as to the way in which the instinctual forces liberated from repression are to be employed should be left to the persons responsible for the child's training. She therefore considers that the only thing to be done is that ' the analyst should guide the child in this most important point '. She gives an example to illustrate the necessity for educational intervention on the part of the analyst. Let us see what she says. If my objections to her theoretical propositions are valid they must stand the test of a practical example.

The case in question is one which she discusses in several passages of her book: that of a six-year-old girl who suffered from an obsessional neurosis. This child, who before treatment displayed inhibitions and obsessional symptoms, became for the time being naughty and lacking in restraint. Anna Freud drew the inference that at this point she ought to have intervened in the rôle of educator. She thought she recognized that the fact that the child gratified its anal impulses outside analysis, when once they were free from repression, indicated that she herself had made a mistake and had relied too much on the strength of the childish ego-ideal. She felt that this as yet insufficiently established super-ego had needed temporary educative influence on the part of the analyst and therefore was not at that point capable of controlling the child's impulses unaided.

I think it will be a good thing if I too select an illustration in support of my view, which is contrary to Anna Freud's. The case

which I shall cite was a very severe one, that of a six-year-old girl who, at the beginning of the analysis, was suffering from an obsessional neurosis.[9]

Erna, whose behaviour at home was unbearable and who displayed marked asocial tendencies in all her relations, suffered from great sleeplessness, excessive obsessional onanism, complete inhibition in learning, moods of deep depression, obsessive brooding, and a number of other serious symptoms. She was treated analytically for two years, and that the result was a cure is evident from the fact that for more than a year now she has been at a school which on principle takes only ' normal children ' and that she is standing the test of the life there. As goes without saying, in such a severe case of obsessional neurosis the child suffered from excessive inhibitions and deep remorse. She displayed the characteristic cleavage of personality into ' devil and angel ', ' good and wicked princess ', etc. In her, too, analysis naturally liberated enormous quantities of affect as well as anal-sadistic impulses. During the analytic hours extraordinary abreactions took place : rages which were vented on objects in my room, such as cushions, etc. ; dirtying and destroying of playthings, smearing paper with water, plasticine, pencils, and so forth. In all this the child gave the impression of a very considerable freedom from inhibition and seemed to take a remarkable pleasure in this often quite wild behaviour. But I discovered that it was not simply a case of ' uninhibited ' gratification of her anal fixations, but that other factors were playing a decisive part. She was not by any means so ' happy ' as might have been thought at first sight and as those with whom the child was associated assumed to be the case in the instance quoted by Anna Freud. To a great extent what lay behind Erna's ' lack of restraint ' was anxiety and also the need for punishment which compelled her to repeat her behaviour. In it, too, there was clear evidence of all the hate and defiance which dated from the period when she was being trained in cleanliness. The situation changed completely when we had analysed these early fixations, their connection with the development of the Œdipus complex, and the sense of guilt associated with it.

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[9] I discussed this case-history in greater detail at the Würzburger Tagung Deutscher Analytiker (autumn 1924) and in one of my lectures in London in the summer of 1925. I propose later to publish the history. As the analysis went on I discovered that the severe obsessional neurosis masked a paranoia.

In these periods when anal-sadistic impulses were being liberated in such force Erna shewed a passing inclination to abreact and gratify these outside analysis. I came to the same conclusion as Anna Freud: that the analyst must have made a mistake. Only—and here is probably one of the most salient and fundamental differences in our views—I concluded that I had failed somehow on the *analytic* side, and not on the educational. I mean that I realized that I had failed to resolve the resistances completely in the analytic hour and to release in its fullness the negative transference. I have found in this and in every other case that if we want to make it possible for children to control their impulses better without fretting themselves in a laborious struggle with them, the Œdipus development must be laid bare analytically as completely as possible, and the feelings of hate and guilt which result from it must be investigated down to their earliest beginnings.[10]

Now if we look to see at what point Anna Freud found it necessary to substitute educational for analytic measures we find that the little patient herself gives us quite exact information about it. After Anna Freud had clearly demonstrated to her (p. 41) that people could only behave so badly to some one they hated, the child asked '*why* she should have any such feeling of hate towards her mother, whom she supposed she loved very much'. This question was well justified and shews that good understanding of the essence of analysis that we often find in even quite little patients of a certain obsessional type. The question points the way which the analysis ought to have taken; it should have penetrated deeper. Anna Freud, however, did not take this way, for we read: 'Here I refused to tell her any more, for I too had come to the end of what I knew'. The little patient then tried herself to help to find the way which should lead them further. She repeated a dream which she had already mentioned the meaning of which was a reproach against her mother for always going away just when the child needed her most. Some days later she produced another dream which clearly indicated jealousy of her younger brothers and sisters.

[10] Anna Freud's little patient recognized this too quite correctly when, after recounting how she had come off victorious in a fight with her devil, she defined the object of her analysis thus (p. 22): 'You must help me not to be so unhappy if I have to be stronger than he is.' I think, however, that this object can be fully attained only when we have been able to clear up the earliest oral and anal-sadistic fixations and the feelings of guilt connected with them.

Anna Freud, then, stopped and ceased to press the analysis any further just at the point where she would have had to analyse the child's hatred against her mother, that is, where it really meant first clearing up the whole Œdipus situation. We see that it is true that she had liberated and brought to abreaction some of the anal-sadistic impulses, but she did not follow up the connection of these impulses with the Œdipus development; on the contrary she confined her investigations to superficial conscious or pre-conscious strata, for, as far as one can judge from what she writes, she seems also to have omitted to follow up the child's jealousy of her brothers and sisters to her unconscious death-wishes against them. Had Anna Freud done so this would again have led on to the death-wishes against the mother. Moreover, up till then she must also have avoided analysing the attitude of rivalry with the mother, for otherwise both patient and analyst must by this time have known something of the causes of the child's hatred of her mother.

In the fourth chapter of her book, where Anna Freud quotes this analysis as an illustration of the necessity for the analyst to intervene for a time in the educational rôle, she is apparently considering that turning-point in the analysis which I have just discussed. But I picture the situation as follows: the child became partially conscious of her anal-sadistic tendencies but was not given the opportunity through a further analysis of her Œdipus situation to become largely and fundamentally free of them. In my view it was not a question of directing her to a painful mastery and control of the impulses liberated from repression. What was needed was rather to subject to a further and fuller analysis the motive-force behind these impulses.

But I have the same criticism to make of certain other illustrations given by Anna Freud. She refers several times to confessions of onanism which she received from patients. The nine-year-old girl who made such admissions in two dreams which she related (pp. 31–32) was, I think, telling much more than that and something very important. Her dread of fire and the dream of the explosion in the geyser, which took place on account of wrongdoing on her part and was visited with punishment, seem to me clearly to indicate observations of parental coitus. This is evident in the second dream as well. In it there were ' two bricks of different colours and a house which they set on fire '. These, as my experience of child-analysis enables me to say quite generally, regularly represent the primal scene. That this was true in the case of this little girl, with her dreams of fire, is to my

mind plain from her drawings of the monsters (described by Anna Freud, pp. 37, 38) which she called ' biters ' and of the witch pulling out a giant's hair. Anna Freud is certainly right in interpreting these drawings as indicating the child's castration-anxiety, as well as her masturbation. But I have no doubt that the witch, who castrates the giant, and the ' biter ' represent parental coitus, construed by the child as a sadistic acid of castration, and further that, when she received this impression, she herself conceived sadistic desires against her parents (the explosion of the geyser caused by her in the dream), that her masturbation was associated with these and that therefore, from its connection with the Œdipus complex, it involved a deep sense of guilt and, on that account, involved the compulsion to repetition and part of the fixation.

What then was left out in Anna Freud's interpretation ? Everything which would have led deeper into the Œdipus situation. But this means that she omitted to explain the deeper causes of the sense of guilt and of the fixation, and made it impossible to reduce the latter. I am compelled to draw the same conclusion as in the case of the little obsessional neurotic : If Anna Freud had submitted the instinctual impulses to a more thorough analysis, there would have been no necessity to teach the child how to control them. And at the same time the cure would have been more complete. For we know that the Œdipus complex is the nuclear complex in neurosis ; hence analysis, if it shrinks from analysing that complex, cannot resolve the neurosis either.

Now what are Anna Freud's reasons for refraining from thorough analysis, which should without reservation investigate the child's relation to his parents and to the Œdipus complex ? There are a number of important arguments which we come upon in different passages of the book. Let us summarize them and consider what they amount to.

Anna Freud has the feeling that she ought not to intervene between child and parents and that the home training would be endangered and conflicts aroused in the child if his opposition to his parents were brought into consciousness.

Now I think that this is the point which chiefly determines the difference between Anna Freud's and my views and our opposite methods of work. She herself says (p. 14) that she has a bad conscience in relation to the child's parents as her employers if she, as she calls it, ' turns against them '. In the case of a nurse who was hostile to her

(pp. 20–21) she did everything she could to prejudice the child against the woman and to detach the positive feeling from her and attach it to herself. She hesitates to do this where the parents are in question, and I think she is entirely right. The difference in our point of view is this : that I never attempt in any way to prejudice a child against those with whom he is associated. But if his parents have entrusted him to me to analyse, either in order to cure a neurosis or for other reasons, I think I am justified in taking the line which seems to me in the child's interest the most advantageous and the only possible one. I mean that of analysing without reservation his relation to those about him, and therefore in particular to his parents and brothers and sisters.

There are several dangers which Anna Freud apprehends from analysis of the relation to the parents and which she thinks would arise from that weakness assumed by her to characterize the child's super-ego. Let me mention some of them.—When the transference is successfully resolved, the child could no longer find his way back to the proper love-objects, and he might be forced either ' to fall back into neurosis or, if this way were closed to him on account of the success of the analytic treatment, to take the opposite direction : that of open rebellion ' (pp. 61, 62). Or again : if the parents use their influence in opposition to the analyst, the result would be, ' since the child is emotionally attached to both parties, a situation similar to that which arises in an unhappy marriage where the child has become a bone of contention ' (p. 77). And again : ' Where the child's analysis cannot become an organic part of his whole life but intrudes itself like a foreign body into his other relations and disturbs them we shall probably only involve him in more conflicts than our treatment solves ' (p. 84).

In so far as it is the idea that the child's super-ego is as yet not strong enough which makes the author fear that, when he is freed from neurosis, he will no longer adapt himself satisfactorily to the necessary demands of education and of the persons with whom he is associated, I would reply as follows :

My experience has taught me that, if we analyse a child *without any preconceptions* whatever in our minds, we shall form a different picture of him, just because we are able to penetrate further into that critical period before the age of two years. There is then revealed in a far greater degree the severity of the child's super-ego, a feature Anna Freud herself has on occasion discovered. We find that what is needed is not to reinforce this super-ego but to tone it down. Let us not forget

that educational influences and cultural demands are not suspended during analysis, even if the analyst, who acts as a quite unbiassed third person, does not assume responsibility for them. If the super-ego has been strong enough to lead to conflict and to neurosis, it will surely retain sufficient influence, even if in the analysis we modify it by little and little.

I have never finished an analysis with the feeling that this faculty had become too much weakened ; on the other hand there have been a good many at the conclusion of which I have wished that its exaggerated power could be still further reduced.

Anna Freud justly emphasizes the fact that, if we secure a positive transference, children will contribute much in the way of co-operation and in other kinds of sacrifice. But I think this surely proves that, besides the strictness of the super-ego, this craving for love is an adequate security that the child will have a strong enough motive to comply with reasonable cultural requirements, if only his capacity for love be liberated by analysis.

We must not forget that the demands made by reality on the adult ego are far heavier than the much less exacting demands with which the much weaker ego of the child is confronted.

Of course it is possible that, if the child has to associate with people lacking in insight, neurotic, or otherwise harmful to him, the result may be that we cannot completely clear up his own neurosis or that it may be evoked again by his surroundings. According to my experience, however, we can even in these cases do much to mitigate matters and to induce a better development. Moreover, the neurosis on its reappearance will be milder and easier to cure in the future. Anna Freud's fears that a child who has been analysed and remains in surroundings wholly adverse to analysis will, on account of his detachment from his love-objects, become more opposed to them, and hence more of a prey to conflicts, seem to me theoretical considerations which are refuted by experience. Even in such cases I have found that the children were enabled by analysis to adapt themselves better and therefore better to stand the test of an unfavourable *milieu* and to suffer less than before being analysed.

And I have proved repeatedly that when a child becomes less neurotic it becomes less tiresome to those around it who are themselves neurotic or lacking in insight, and in this way too analysis will exercise only a favourable influence on their relationships.

In the last eight years I have analysed a large number of children ;

and my findings in regard to this point, which is crucial in the question of child-analysis, have been constantly confirmed. I would summarize them by saying that the danger apprehended by Anna Freud, that the analysis of a child's negative feelings to its parents will spoil their relationship, is always and in all circumstances non-existent. Rather, the exact opposite is the case. Exactly the same thing takes place as with adults: the analysis of the Œdipus situation not only releases the negative feelings of the child towards its parents and brothers and sisters but it also in part resolves them, and thus makes it possible for the positive impulses to be greatly strengthened. It is just the analysis of the earliest period which brings to light the hate-tendencies and feelings of guilt originating in the early oral deprivation, the training in cleanliness and the deprivation connected with the Œdipus situation. And it is this bringing of them to light which largely frees the child from them. The final result is a deeper and better relation to those around him, and by no means a detachment in the sense of an estrangement. The same applies to the age of puberty, only that at this period the capacity for detachment and transference necessary in that particular phase of development is powerfully reinforced by analysis. So far I have never had complaints from the family, after the analysis terminated or even while it was going on, that the child's relation to those around him had become worse. Now this means a good deal when we remember the ambivalence of the relations. On the other hand I have frequently received assurances that children have become much more social and amenable to training. So in the end I do the parents as well as the child a great service in this very matter of *improving* the relation between them.

Undoubtedly it is desirable and helpful that the parents should support us in our work both during and after the analysis. I must, however, say that such gratifying instances are decidedly in the minority: they represent the *ideal case*, and upon this we cannot base, our method. Anna Freud says (p. 83): 'It is not only definite illness which will decide us to analyse a child. The place of child-analysis is above all in the analytic *milieu*; for the present we must confine it to children whose parents are analysts, have themselves been analysed or have a certain confidence in and respect for analysis'. In reply I would say that we must discriminate very clearly between the Cs and the Ucs attitudes of the parents themselves, and I have repeatedly found that the Ucs attitude is by no means guaranteed by the conditions desiderated by Anna Freud. Parents may be theoretically

entirely convinced of the necessity of analysis and may ostensibly wish to help us with all their might and yet for complexive reasons they may hinder us in our work all the way along. On the other hand I have constantly found that people who knew nothing about analysis—sometimes just a homely nurse who met me with personal confidence——have been most helpful owing to a favourable Ucs attitude. However, in my experience, anyone who analyses children has to reckon with a certain hostility and jealousy in nurses, governesses, and even mothers and has to try to accomplish the analysis in spite of and against these feelings. At first sight this seems impossible and it certainly is a special and very considerable difficulty in child-analysis. Nevertheless in most cases I have not found it insuperable. Of course I presuppose that we have not ' to share with the parents in the child's love and hate ', but that we handle both positive and negative transference in such a way as to enable us to establish the analytic situation and to rely upon it. It is amazing how children, even little children, then support us by their insight and their need for help and how we are able to include in our work the resistances caused by those with whom the little patients are associated.

My experience, therefore, has gradually led me to emancipate myself in my work as far as possible from these persons. Valuable as their communications at times may be, when they tell us about important changes which are taking place in the children and afford us insight into the real situation, we must of necessity be able to manage without this aid. I do not of course imply that an analysis may never come to grief through the fault of those associated with the child, but I can only say that so long as the parents send their children to be analysed at all I see no particular reason why it should be impossible to carry the analysis through simply because their attitude shews a lack of insight or is otherwise unfavourable.

From all that I have said it will be clear that my position with regard to the advisability of analysis in various cases is entirely different from Anna Freud's in other respects as well. I consider analysis helpful not only in every case of obvious mental disturbance and faulty development, but also as a means of diminishing the difficulties of normal children. The way may be indirect, but I am sure that it is not too hard, too costly, or too tedious.

In this second part of my paper my intention was to prove that it is impossible to combine in the person of the analyst analytical and educational work, and I hoped to shew why this is so. Anna Freud

herself describes these functions (p. 82) as 'two difficult and contradictory tasks'. And again she says: 'To analyse and to educate, i.e. at one and the same time to allow and to forbid, to loose and to bind again'. I may sum up my arguments by saying that the one activity in effect cancels the other. If the analyst, even only temporarily, becomes the representative of the educative agencies, if he assumes the rôle of the super-ego, at that point he blocks the way of the instinctual impulses to Cs: he becomes the representative of the repressing faculties. I will go a step further and say that, in my experience, what we have to do with children as well as with adults is not simply to establish and maintain the analytic situation by every analytic means and to refrain from all *direct* educative influence, but, more than that, a children's analyst must have the same Ucs attitude as we require in the analyst of adults, if he is to be successful. It must enable him to be really willing *only to analyse* and not to wish to mould and direct the minds of his patients. If anxiety does not prevent him, he will be able calmly to wait for the development of the correct issue, and in this way that issue will be achieved.

If he does this, however, he will prove the validity of the second principle which I represent in opposition to Anna Freud: namely, that we must analyse completely and without reservation the child's relation to his parents and his Œdipus complex.

II

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With the publication recently of Anna Freud's book on this question, it appears that a considerable divergence of opinion exists among analysts with regard to both theory and practice in analysis of children. Consequently it seems desirable that the problems should be discussed and ventilated fully, even by those who do not practise analysis of children; particularly since some of the points brought forward are theoretically of quite fundamental importance for psycho-analytical knowledge. Much of the knowledge of the human mind which psycho-analysis represents would seem to me invalidated and disproved if some of the recent propositions with regard to the analysis of children are held to be true and justifiable. In my remarks I shall deal with one or two of these points only.

Anna Freud's views about the necessity of mingling the analysis of

children with educative principles are based largely on what is, as she frankly admits, an assumption, i.e. the *difference between children and adults in the analytic situation*, for she says this difference is apparent and needs no theoretical explanation. It seems to me, on the contrary, that this difference, though apparent, is merely apparent : that is, it is superficial and corresponds only with external reality. Where psychical reality is concerned the difference between children and adults comes to be negligible. Children have no knowledge that they are ill or wish to be cured and therefore do not bring themselves to the analyst, but this their parents do for them. Often enough, indeed, in a neurotic adult, the wish to be cured is so weak that he never gets over the threshold of the analyst's consulting-room, and we know he would rapidly break away from analysis for good if it did not soon begin to bind him to it in various ways. We see every kind of reluctance to be analysed expressing itself ; all the energies are directed *against* being analysed. The conscious awareness of need for cure in an adult may make him come for treatment, but it does no more, and the parents do that for the child. Again, with regard to being aware that he is ill, the adult acknowledges certain symptoms, it is true ; but except for these, which once the analysis has begun he only admits when it suits him to do so, he is in exactly the same position as a child who is miserable and unhappy, but not aware that it is ill, and he is as ignorant of many of his symptoms as a child. To be sure, the adult rationalizes and disguises his indifference to cure and dislike of treatment in a way the child does not trouble to do. I should imagine that to be spared these rationalizations and to have the patient's continued attendance ensured by the parents would be advantageous features in the analysis of children as compared with that of adults—if it were not for other complications in regard to the parents !

In another way, too, I attribute very little importance to the adult's conscious wish for cure. It is not only denied and annulled every moment by his resistances but it turns out to be in itself but a mask. Where the wish for cure is strong at the start (as it often becomes later in the transference period) it always reveals itself as the representative of an unconscious phantasy, so that it simply does not mean what it purports to do. This has been very clearly brought out by Nunberg in his paper on ' The Will to Recovery ' [1], and I should endorse his views in every detail. The wish to be cured, so far as it exists, is *in*

[1] This JOURNAL, Vol. VII, 1926.

analysis the wish for the realization of an unconscious phantasy, and has to be analysed like everything else. It then turns out to be far from 'real' or justified by reality, and even proves an obstacle, in that for a time it will be made use of in various ways for purposes of resistance.

The idea that the analytic situation is different for children and for adults recurs again when Anna Freud says that, in the analysis of adults, the associations are free and nearer to unconscious content than those of children, because the adult is eliminating conscious criticisms, etc. She suggests further that we cannot analyse behaviour, speeches, actions, etc., in ordinary life, because we have no 'free associations' to go upon. This statement is directly contravened by the facts. We can analyse correctly a great deal in everyday life, as Professor Freud was the first to shew, without any help from the subject—whatever the ethics of such a proceeding may be—so that undoubtedly we can do the same with children. All these differences between adults and children quoted by Anna Freud relate to conscious attitudes; the idea of being ill, or of wishing to be well, or of being required to do this or that for analytic purposes, are all of them irrelevant in analysis—related to external reality, with which analysis has no concern. For the analysis they have no value except in so far as they represent unconscious content, and it is *there* that their significance for analysis lies. They are merely means of expression for the unconscious, just as in the play-technique for children the unconscious finds direct means of expression in the toys. As for the analytic situation—that by which repressed mental content is introduced into consciousness—it is the same for both children and adults, and that would seem to be the essential point of comparison between the two and not external considerations.

A great deal, too, seems to hang on the question whether or not children develop a transference-neurosis. Anna Freud says they do not, and other analysts say they do. But at least Anna Freud's reasons why they should not seem unsatisfactory. The second of the reasons she gives is actually no reason at all. She says that since she does not preserve the aloofness of the adult's analyst, cannot be a mere reflection of the unconscious, and has to be an imposing and attractive personality to the child, the images are blurred and undistinguishable. It is, of course, true that in such conditions the images would be blurred, but it does not follow that no transference-neurosis has developed just because it remains undistinguishable. In this connection Anna Freud's

contentions are not even logical: throughout her book she says analysis cannot be done in the customary way with children because they are not like adults, and here she says they are not like adults because analysis is not done in the customary way with them.

The other reason advanced by Anna Freud why children do not develop a transference-neurosis seems much more important. She says children cannot do this because in them the Œdipus situation is still active in relation to the original objects—the parents—therefore there can be no *transference* from them. This, it is to be noted, she applies to children who are over six years of age. To begin with, one would like to know at what age capacity for transference is supposed to set in; even adult patients have often lived all their lives in the immediate environment of their parents and remained completely 'bound' to them, yet this does not preclude the development of an analytic transference in their case. But the really important part of this proposition seems to be the way it questions and invalidates all that we have hitherto learnt about the true nature of the Œdipus complex, i.e. its unconscious character. It is surely clear enough from adult analyses that it is not the *reality* of the patient's relations with his parents at any age that is reflected in his neurosis. The Œdipus complex and the pregenital phantasies woven into it originate and have their existence in the mind—or in the 'imagination', as we might express it in ordinary everyday speech—and are quite independent of any correspondence with reality, as every transference-neurosis shews us. These phantasies are played out in the *Unconscious*, and the objects of them are not the real father and mother at all, but the unconscious imagos of them. The unconscious relations with these imagos are then *transferred* to the *real* parents and worked off on them (just as they are worked off on the analyst in the transference-neurosis), and this gives rise to the morbid behaviour of which so often a child's neurosis largely consists. This is a perfectly commonplace and familiar fact to every analyst, but it would nevertheless be fundamentally disproved if the statements made by Anna Freud were true. I have at the present time a patient aged forty, who was taken from his parents at the age of eight months, and brought up by a stern and inhibited maiden aunt several hundred miles from the parents; yet the neurosis is predominantly hysterical and the phantasies differ in no detail from those of persons whose experience has been more usual. Although he never, after the age of eight months, had a father or mother in anything approaching the usual sense, the phantasies are occupied with nothing

but father and mother, jealousy of brothers and sisters whom of course he never saw, and so on. The only point in which this case differs from any other is that consciously the patient attributes his neurosis to the fact of his having been removed from his parents ; it is surely obvious that this is not to be taken at its face value, and is simply a representative of an unconscious idea. This is only a clearer example of what we so commonly find marked in persons who were the youngest of the family, for instance.

The objects of unconscious phantasies are imagos formed to some extent after the pattern of real people, but not to a material extent on real experience, at any rate in present-day individuals.

Just the same applies to the super-ego as to the libidinal phantasies. It is a phantasy, and is founded on identifications which to begin with had no moral implications. The boy wishes to be immensely big, powerful, rich, sadistic, as in his imagination his father appears to be. The girl wishes to be radiantly beautiful and adored, possessed of unlimited jewels, finery, children, and so on. Every day we see how little these phantasies tally with what the parents really were and really did and had. Later on these identifications become remodelled, divested of their crudely concrete material character, ' idealized ' and moralized. The ambitious child wishes to become successful in ' being good ' (clever, clean, industrious, sweet-tempered and so on), and so to win applause. This is but another form of the first crude identification with the parents. The desire to be ' good ' is the same egoistic impulse as the desire to be pre-eminent and omnipotent (to become like God = to become like the parents). But again the parents are not in reality such supermen as in its imagination the child aspires to be ; they are not morally perfect really. The child attributes this perfection to them in its phantasies in order to create a new model which it may permissibly strive to imitate. Between these two kinds of ideal, the materially ambitious and the morally ambitious, is interposed the sexually ambitious, one that in all probability is very little different from and very little later in time, if at all, than the first ' material ' ideal. It is this that gives rise to the sense of guilt which impels to the formation of a permissible ' moral ' ideal, and, as it seems to me, this sense of guilt is simply an introjection of the *fact* of frustration of the sexual phantasies. We meet this again in every analysis in the transference situation : ' I must not love you because you will disappoint me and refuse me '. Thus the child's ideal of goodness—its super-ego—is derived from the bitterness of its experience in frustration and is simply

an item in its phantasy-life. It is not so much the ' nursery conscience', the lessons in cleanliness and so on, that begins to instil morality into children. When we think of their rich phantasy-life, which analysis reveals to us, we see that it consists of things unimaginable to our conscious civilized minds, things that *never could* be realized in any environment ; even in regard to pregenital pre-Œdipus phantasies, therefore, the factor of frustration operates. It is not actual threats or prohibitions, or moral or ethical injunctions, which instil a sense of guilt into the child ; it is the fact of its own inferiority and the unattainability of its sexual desires, though it is true that the parents' moral injunctions contribute to this, in that they consist of actual disappointments and frustrations and also signify the opposite of the love and applause desired from them. Parents in reality vary very greatly in the degree to which they endeavour to curb and check their children's unsocial and sexual tendencies. What the analysis of adults shews us, however, is not any definite relation between this experience and neurosis—many severe neuroses develop in persons who were very little checked and were allowed comparatively to ' run wild ' as children ; and the comparative absence of moral training of children in the lower classes ought to shew us the unimportance of this factor in childish experience. The children of the lower classes are checked indeed and their desires frustrated—in the main, however, only in so far as they disturb or interfere with the parents' convenience, not so much for moral reasons : that is, the situation approximates much more nearly to the crude unconscious phantasy of deliberate frustration by the parents. Yet no one who has had occasion to observe persons of this class from an analytic point of view can fail to be struck by the prevalence of an exceedingly severe super-ego in them, torturing them with a sense of guilt and driving them to constant provocation of punishment. Recent analytic work tends to shew the same thing in relation to criminals—and the lower are called the ' criminal ' classes. Thus what engenders a sense of guilt is the experience of frustration, and the stronger the ambitious and libidinal desires the more intolerable is this experience—the greater the damming-up of the libido. The phantasy ' I am worthless and good-for-nothing, because I wished to kill my father and could not ', or ' I am castrated, because I wished to enjoy my mother ', is and remains a phantasy and has no relation to reality whatever. There is no *real* ground for a sense of guilt, no *actual* danger to be apprehended on account of either wish. Yet this phantasy is the basis and mainspring of all the morality, sense of guilt, desire

to be well, realization of defects, that exists in adults and provides their motive for cure, and this basis and mainspring of morality, etc., which we know exists in children, must surely be sufficient for our purposes with them.

Anna Freud's objection to analysing children fully without intermingling any moral implications is that the inhibitory sense of guilt, etc., the super-ego, is too little developed in them to restrain them from antisocial and sexual indulgence after analysis. But why after analysis ? The argument here is that *making conscious* the antisocial and sexual desires will increase their strength and hinder any further development of the sense of guilt. This is at variance with all our experience. The analysis of a child, however small, is a process by which it learns, just like an adult, to *tolerate the bitterness* of frustrated and disappointed desires ; it never can enjoy gratification of them—that is, of the Œdipus wishes and the essential part of the pregenital phantasies. Therefore we do not need to fear that it will indulge in gratification of them. In regard to masturbation and some pregenital gratifications, once it can tolerate the fact of Œdipus frustration it will be much less in need of satisfaction. A great deal of the intensity of libidinal desire and the general avidity of neurotics is, we know, due to a non-acceptance of the fact of frustration—it is a perpetual seeking after a reassurance that disappointment has *not* to be endured. Once disappointment can be endured, desire diminishes. Therefore it is of cardinal importance that the Œdipus conflict should be fully analysed in children, for on this all depends. Moreover, when the child can bear its Œdipus wishes and its dread of retribution in consciousness, it will perceive their phantastic nature and their incongruity with reality—and it does perceive it, as those who have tried this course tell us. The little boy will be able to appreciate his mother's love and to return it only when he is *willing to know* that he is too small and young to have from her all that he would have liked, and only through this knowledge —not through having morality instilled into him. His super-ego is not yet desexualized, and until it can become so he is not capable of morality in the usual sense. The best chance of its becoming so is by making his phantasies conscious.

Psycho-analysis is Freud's discovery of what goes on in the imagination of a child—and it still provokes great opposition from us all ; this ' childishness ', these unconscious phantasies, are abhorred and dreaded —and unwittingly longed for—by us even yet, and this is why even analysts still hesitate to probe these depths. But analysis has no

concern with anything else : it is not concerned with the real world, nor with the child's or the adult's adaptation to the real world, nor with sickness or health, nor virtue or vice. It is concerned simply and solely with the imaginings of the childish mind, the phantasied pleasures and the dreaded retributions. *These* have to be taken at their full value and credited with their true importance ; for morality is nothing but frustration under another guise—if we can teach our patients to tolerate the latter the former follows as a matter of course.

III

M. N. SEARL

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Scattered throughout all analytical literature are observations, both theoretical and clinical, on the early causes of neuroses, their infantile origin, the paramount importance of the first five years of a child's life, the necessity in any complete adult analysis for the reconstruction and recovery of memories concerning the conflicts of these early years, and so on. These are the commonplaces of our analytical standpoint, of such frequent statement and such unquestioned authority that citation is superfluous. Yet we seem now to be confronted with an attitude on child analysis which involves the denial of them. Put briefly, the situation is this—if the conflicts essential to the formation of neuroses lie in these early years, the essential libidinal position has already taken form ; early ego and super-ego, derived from libidinal sources, have already taken that alignment to libidinal trends which is the determining factor for all subsequent development.[1] From the point of view of libido the situation remains in essentials the same through subsequent years. Ego alterations now take the place of prime importance, involving also differentiations of the accretions to the early libidinally derived super-ego, but no fundamental alteration of it—otherwise it is clear that we should find cases in which these subsequent alterations were responsible for the formation of neuroses so that we should sometimes be spared the task of penetrating to the infantile origins. Put more briefly still, after his first five or six years the neurotic human being is in libidinal essentials the same, in ego development different.

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[1] I omit all reference to the destruction of the Œdipus complex because in neurotics this does not take place.

Therefore any technique which would make child analysis possible must be adapted to this difference of ego (not super-ego) development, but must keep the libidinal position unaltered. But just here to our amazement we find Anna Freud taking up the exactly opposite position: in *libidinal* relationship—attachment to parents, super-ego formation—the child must be treated as essentially different from the adult, but to make an analysis possible his *ego* attitude to it must, by hook or by crook, be brought into line with that of the adult. The theoretical contradiction involved seems to me indisputable.

As concerns practical experience, my first slight venture into child analysis was in 1920 with a little girl of six. I had not then read *Little Hans;* or any work by Hug-Hellmuth or Melanie Klein. My chief guide in technique was the conviction that I must follow, not guide or influence the working of the child's mind: of introducing pedagogy into analysis I never dreamed. The dozen or so interviews I had confirmed me in this attitude and in the expectation that a little girl of six would express herself freely and spontaneously only where word-speech could at any moment be exchanged for action-speech. Two subsequent much longer and partially successful cases of boys of nine and ten seemed to me to indicate that this necessity was still present at a later age, although I was not satisfied that I had evolved a satisfactory technique. At this time I had read *Little Hans* and Hug-Hellmuth's *Technique in Child Analysis.* Acquaintance with some of Melanie Klein's writings influenced my technique in my next and undoubtedly most successful, though unfinished, case. Here I found myself directly confronted by a doubt already raised in my mind by Melanie Klein's work, on the question of 'direct interpretation' of the complete Œdipus situation; i.e., is it theoretically justifiable or practically safe to say to a pre-latency small boy, 'You want to put your wee-wee into Mummie, and you hate Daddie because he can do it and not you'? On the question of what I may call a 'fragmentary' interpretation of this situation I had no hesitation: e.g., 'You want to be as old as Daddie so that you may do what Daddie does to Mummie.' 'You hate Daddie because he has a bigger wee-wee than you and can do more with it', and so on.

I was impressed by one or two incidents of which the following is an example: while Peter's usual form of resistance to an interpretation was a very vigorously expressed verbal rejection, he abandoned without a word and left untouched for several days a piece of material which he was sewing after I had given a very nearly direct interpretation

about his wanting to do to Mummie what he was doing to the material with the needle. I thought this might indicate either a qualitatively different resistance or one of such big quantitative difference as to amount to the former. Subsequent talks with Mrs. Klein on the question of her technique shewed me that my interpretation was incorrect and had only welded the resistance the more firmly: I had interpreted symbolically one detail from the picture, while failing to grasp its significance in the total setting. I have reason to think that this was also true of other incidents.

My theoretical doubts had centred round the question of the stability of the very early super-ego. I found that my own analysis removed these and that their motivation had been the fear of the negative reactions involved in the very early Œdipus formations. After this my difficulties in child analyses decreased; the next two were far more successful, and further helped by the series of lectures given by Mrs. Klein in September, 1925, I found it possible to develop a play technique in which I could have confidence. In my eight succeeding child cases between the ages of six and thirteen, my confidence has been fully justified; this technique seems to me to take into account ego differences between child and adult while being based on libidinal similarities and capable of adaptation to different ages. Able to penetrate with its aid to early super-ego formations, I have been impressed again and again, in contradistinction to Anna Freud, by their amazing stability in face of apparent alteration. For example, C., aged five, was suddenly plunged into an environment of the freest type after a nursery training of average strictness. He blossomed out wonderfully, adopted the new freedom, seemed to have an entirely new super-ego. 'Adopted' is the correct word—he developed an acute neurosis, and under the even greater freedom of the analytical hour, of which he made full use, I found the greatest fear and hate of these very freedoms, and a passionate desire to get away from the place in which to all appearance he had had the least censured expression of libidinal wishes,—in short, a super-ego of the severest and most intractable type completely unchanged by the drastic changes of environment.

Experiences of this kind can be multiplied from every case of early analysis known to me. They leave me no room for doubts about the stability of these super-ego deposits from the earliest parental imagines, with, of course, a corresponding capacity for transference of the latter to the analyst. But that involves touching on another question, and

I have said enough to indicate the path which my own convictions on child analysis have taken and the manner in which they have been confirmed.

IV

ELLA F. SHARPE

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As a contribution to this discussion I should like to give the reactions which I carefully registered on a recent occasion when treating a girl of fifteen years. The experience was a novel one for me, and illuminated as nothing else could have done what surely must be some of the causes of the resistances against the analysis of children by the technique of direct interpretation of play activity adopted by Melanie Klein. My previous experience with an adolescent girl was six years ago, since when I have been engaged solely on adult analyses. Whatever the difficulties that beset the latter, one is accustomed to dealing with them through the unperturbed suspension of one's mind working freely in complete emotional detachment. The patient's reactions to the analyst provide the most valuable of the analysable material. The parent of the adult patient as a reality factor in the actual analysis is absent.

I had no misgivings in accepting a fifteen-year-old girl for analysis since my previous case, though six years ago, worked out successfully.

The girl had been sent down from school because she had been discovered writing what was described as an obscene letter to a boy. Complete sexual knowledge was demonstrated in the letter. The parents were horrified by the disclosure. The father was too ill to get up for two days. The mother on advice went to a psycho-analytical doctor, who sent the girl to me. The mother came to see me before the girl had her first treatment, and one of her first remarks was that she hoped her daughter was not going to get the idea that mothers never understood their daughters. Her daughter had seemed to intimate that she thought so after she had seen the doctor, and this, the mother said in a warning tone, 'was making her think'. She wanted her daughter to remain dutiful and obedient. I asked her to give me an account of her child. I gathered from her that the girl had always been a happy contented child, she had been singularly innocent, and had never had any impure thoughts until she met this boy a year ago. She had learnt these things from the boy. They were not the

girl's own thoughts at all. She hoped I should get them out of the girl's mind in a month, so that she could go back to school. Until a year ago she had known all her daughter's thoughts. She could not see what good it was going to be for her daughter to talk to me. She scouted the idea, which I then presented to her, that the letter was an end result of a great deal of thinking and phantasying. She said ' No, the child was good and pure until she met the boy '. I explained a little of the analytic procedure very simply, during which time she sat adamant, resistant, and uncomprehending, saying at the end she did not understand at all. The analyst was already suspect and evoking hostility because she had not taken up the mother's attitude concerning the daughter.

With such a triangular situation, the analyst knows that a successful issue to the analysis will mean that the girl will not remain the obedient child in the parents' sense, but will become independent and unafraid and mistress of her own sexual thoughts. That is, not only is the mother negative to the suspect analyst, but the analyst is in immediate opposition to the wishes of the mother. The analyst is aware that not only does the parent here represent in reality the deep layers of the infantile super-ego in the analyst, but that the conscious purposes of the analyst are in accord with the deepest levels of that hostile negative attitude to the original parent who forbade sexual activity and curiosity.

The girl came, unhappy and sullen, and then tearful at the thought of her disgrace. She looked upon coming to me as a punishment. I explained she came to understand herself. This eased her for a time, and she began to talk tentatively about her older brother, younger sister, and events of the day. A little headway was made when the jealousy of her brother became apparent. I pointed out this and its reason. She wanted to deny knowledge of the difference between herself and her brother, and when I quoted her letter written at school, she immediately produced her mother's arguments, that the boy in question had told her all she knew. She had known nothing before. After this she spoke mere superficialities for several days, and there remained only one way of breaking through the blockade. This one way lay through the interpretation of the ceaseless play of her hands. She bit her nails, pulled the cuticle, twisted her coat and sleeve buttons, pulled the corners of her handkerchief throughout every minute of the hour. I now interpreted this directly, this telling her that she was not saying the things that were in her mind. She contradicted. I referred

to the fact that she had never spoken to me about the letter and further that she had not yet told me anything of the natural curiosity and the experiments she had made on her own body. She flared up in anger, contradicted me, and then said she did not know what I meant, and refused to speak again. The next day she opened with : ' I have told my mother everything you said to me yesterday. If you think I am going to talk about those sort of things, I'm not. I was sent away from school for writing that letter. That shews it was wrong. My father and mother think it was disgraceful, and so it was. I'm not going to think or do anything more my parents would not like, so I'm not going to talk about the letter nor anything like that at all. I know what's right and wrong, and mother wants to see you and is writing to ask you to see her as soon as you can '.

' All right ', I said. ' Your mother can send you here, of course, but no one can make you talk to me unless you want to do so '.

After this hour I began to experience a feeling of discomfort. I found myself doubting the wisdom of so direct and early an interpretation of her symbolic masturbation. My discomfort behoved me to watch my own mind. I found I was anticipating in phantasy the mother's visit. The girl had rejected my interpretation of masturbation. How should I justify myself if the child had told her mother of this ? For the mother would certainly believe in her daughter's innocence. I detected here reverberations never stirred by an adult analysis. The parents' condemnation which I imagined might be directed towards myself in these external conditions I recognised as the strictures of my own infantile super-ego. I detected too at another time a reaction to the child's stubbornness, not experienced in the case of an adult where one's mind is set so completely on the task of tracking down where the resistances are and what they are defending. I caught myself thinking, ' It isn't *my* fault you have had to come, you should not have written that letter, then you wouldn't be coming to me ! ! ! ' Here I was caught out by my identification with the parent in condemning the child's sexual interests, i.e. at the mercy of the infantile super-ego condemnation of myself.

The clarifying of my own reactions made it possible for me, on the mother's arrival, to speak the plain truth regarding her daughter. I elicited from the mother what the girl had said, and found, as I expected after my self-analysis, that the girl had said very little to her except that she thought she was doing no good, and that she did not want to talk about the letter. She had not said a word about the

interpretation regarding masturbation, which had been the content of the phantasy in my own mind, and concerning which I had queried the wisdom of my technique.

The freedom to speak plainly to the mother corresponded to a release in myself from the deeper levels of the unconscious negative to the condemning parent in my own mind.

The rightness of the analytic procedure, and the fact that my queries and doubts were due entirely to my own reactions, were amply proved the next day.

The girl gave a chain of associations, beginning with a reference to a little friend who was going to have a new baby sister, continuing with references to her pleasure in looking at things in shops, ending by asking me if she could look into a book on painting she saw on my shelf. To this I said, ' Yes, and I will tell you what you are asking in another part of your mind '. I gave her the meaning. She resisted, then was silent. After the lapse of ten minutes without any further comment she began to tell me of her fear of high places, and recounted all the accidents she could remember of cutting herself, bruises after falling down, etc. I did not interpret further, but waited for the end of the hour to see if my first interpretation had been accepted. When she got up from the couch she looked at me and said shyly, ' Could I have just a peep ? '. She had her ' peep ' and went away smiling for the first time, saying she was coming to me again after the holidays.

The mother during the holiday consulted her own doctor, who was antagonistic to psycho-analysis, and brought to an end the chance of following up this hard-won successful hour.

In reference to this particular case :—

1. We have an example of extreme hostility on the part of the mother. Had that hostility only just stopped short of taking the child away, there was every hope of making a successful analysis, the positive transference having been evoked solely by interpretation.

2. This is a case of analysis with a fifteen-year-old person. It is not child analysis. But in the task of dealing with resistances my only way at last lay through the interpretation of the symbolical play of the girl's hands which continued throughout several hours, and with this I would link the direct interpretation of her wish to look inside my book. These represent an adoption of Melanie Klein's play technique just at the point where the patient was acting or desiring to act out her phantasies. The justification lies in the fact that the method achieved the result of a positive transference, when more analysable

material became accessible. The combination of this direct interpretation of play activity on my part in a case where the hostility of the parent was so marked produced the reactions I have related. No wonder that in cases of children where the sole method of approach lies through interpretation of play activity the reactions of the analyst are of vital importance. The less hostile the parent the more unconscious the reactions may be in the analyst; the more hostile the parent authority, the more will an analyst, unaware of his own unconscious reactions, be tempted to deal with that hostility through other channels than that of analytic interpretation to the child concerned.

The novelty of my experience, the necessity for immediate analysis of my reactions in this case, has illuminated the difficulties that beset child analysis.

Here very adroitly the girl ranged herself in league with the demands of her infantile super-ego, i.e. in alliance with her mother. I became the ally of her unconscious wishes and her repressed unconscious negative attitude to her mother, and therefore provoked a conscious hostility. Had I not been aware, or had I suppressed the reactions of my own mind, I could have rationalized. I could have waited before interpreting as I did, on the plea that the time was not ripe. I could have played a long-drawn out blockade, with no results. I could have allowed the girl to keep to superficialities and tried by humouring her to get a positive transference. I could have been prevented from making interpretations by my own unconscious guilt reactions due to repressed infantile negative feelings to the parent imago. But I proved in the last analysis that the transference occurred through interpretation alone.

The problem of child analysis seems more subtly implicated with the analyst's own deepest unexplored repressions than adult analyses. Rationalizations that the child is too young, that the weakness of the child's super-ego makes an admixture of pedagogy with analysis indispensable, and so on, are built upon the alarms of that very same infantile super-ego in the analyst that he has to deal with in the child before him. That infantile ' super-ego ' in the last resort becomes the dictator in the situation between analyst, child and parent, and only so far as that deepest level is analysed in the analyst can we look for scientific accuracy in the matter of child analysis.

V

EDWARD GLOVER

LONDON

Whilst psycho-analysts are never lacking in vigour when it is necessary to defend analytical principles against encroachment from without or within the movement, their attitude on most subjects of scientific discussion is characterized by a conspicuous absence of emotional bias. On one or two matters, however, it would appear that absence of empirical data sufficient to closure discussion gives rise to a more than usually animated expression of personal opinion. I imagine this is especially true of the subject of child analysis. We are of course familiar with the fact that when patients happen to be acquainted with psycho-analytical theory this knowledge is invariably turned to advantage during analysis as a resistance. I have recently reported a case in which theoretical rumination on the nature of the super-ego was exploited in the interests of the castration complex; the patient profoundly disagreed with an article he had read on the anachronistic nature of this ego instance. I do not suggest that so crude a reaction is operative in discussing the subject of child analysis, but I think it is possible that the idea of radical interference with the mental functioning of young children is calculated to arouse faint echoes of outworn conflicts. Otherwise I find it difficult to account for the fact that although the work on *early* analysis has been produced by one single investigator (Melanie Klein), it has been subjected to vigorous criticism by other analysts whose labours have been in quite distinct fields. Those who deal solely with adolescents and adults are of course entitled to hold theoretical views on the subject, but these are at best pious opinions. Even the work of Anna Freud, dealing as it does with the analysis of children in the latency period, can scarcely be regarded as a satisfactory basis for criticism of the methods and findings in a pre-latency grouping. Indeed it is striking to observe that many of Anna Freud's criticisms of Melanie Klein's methods are based on theoretical grounds. By the same token, I feel that I have little or no right to take part in a symposium on child analysis; the few male children I have analysed have been in the latency period. Nevertheless, whilst I should prefer to await the findings of investigators who have used Melanie Klein's methods on children under the age of six, there are two aspects of the discussion on which the ordinary analyst may hold a legitimate if not too emphatic opinion.

First as to the development of a transference neurosis in children, I can only express the view, based on the slender evidence of one or two cases, that, in the latency period at any rate, analysis brings about a transference neurosis which differs in no fundamental respect from the transference neurosis in adolescents and adults. Theoretically, therefore, I am prepared to hear that in still younger children a similar transference phenomenon can be observed. I cannot help thinking that Anna Freud's argument against its existence in latency analysis is countered by her own findings that it is possible to induce deliberately and for the purposes of her method a transference passion in young children. In fact the existence of infantile neuroses, involving the mechanisms of identification and displacement, suggests that at a very early age the actual parents are already to a large extent lay-figures as far as infantile phantasy is concerned. I imagine this is in keeping with Freud's views on the preservation of racial memories, on archaic types of reaction, and on the manifest discrepancy between actual infantile experiences and primal phantasies.

To return to more practical considerations it is curious to note that in the analysis of adults a state of affairs is often described which has some resemblance to the findings of Anna Freud in her latency analyses. One often hears the complaint that the patient is shewing no sign of a transference neurosis. The patient may be obsessional in type or shew striking character abnormalities, the analysis has followed rather an intellectualistic course and, as far as affective associations go, the analyst seems to have been left out in the cold. But this is far from representing the true state of affairs, as a deliberate stimulation of the patient's phantasy activity will soon shew. The analyst has simply been misled for the time being by a defensive crust or has been on the outlook for more positive signs than should have been expected.

In this connection Anna Freud seems to suggest that the difficulty of applying a pure word-association technique in child analysis justifies a radical difference in the approach in children as compared with adults. But, after all, is there such a difference between the analysis of children and the analysis of adults? The adult plays with the association technique in much the same way as Melanie Klein's cases play with her toys. We do not obtain analytical material from the adult because the latter says ' I am prepared to co-operate with you by saying what is in my mind ', but because willy-nilly, as soon as the patient starts saying what is ' in his mind ' it is magnetically distorted by what is ' not in his (conscious) mind ', i.e. by unconscious phantasy, etc. The same

seems to happen in child analysis, making allowance for what is practically only a difference in dialect.

Another matter concerning which the ' adult ' analyst is entitled to hold strong opinion is the advisability of making libidinal concessions for the sake of analytic progress. I think it is generally agreed that so far as adult analysis is concerned this is a policy of despair. Concede the adult an inch and he will demand an ell. Moreover the manner in which he exacts his ell is quite clearly infantile, and there is no reason to suppose that children will drive any easier bargain. When an adult analysis begins to stagnate we are accustomed to ask ourselves not so much whether we have been too sparing of gratification, but whether we have unconsciously allowed the patient to convert the analytic situation into an infantile situation. Moreover, it is not without significance that when we find ourselves at a complete deadlock with adult patients a fresh opening can often be made by following Melanie Klein's method of direct interpretation. Again, Ferenczi's method of ' forced phantasy ' which he adopts in certain difficult cases is very little different in principle from Melanie Klein's system of stimulating phantasy by means of toys.

On the whole, then, whilst I think that deductions drawn from experience of analysis of adults are of little value compared with direct analytic observation of children themselves, it would seem that many of Melanie Klein's views can be supported by observations from the adult. This is a fact which goes far to outweigh criticisms based mainly on theoretical preconceptions.

VI

ERNEST JONES

LONDON

Whatever opinions I may have tentatively formed on this subject are based on the inferences to be drawn from adult analyses and from a few analyses of older children, including two at the age of nine, but above all from following closely several analyses of younger children conducted by skilled specialists in this branch.

Differences of opinion about the value of child analysis refer chiefly to the age preceding the latency period, i.e. to ' early analysis ' in the strict sense, and the following remarks apply essentially to this early age. It is further plain that the central point of the differences in question relate to the question of the super-ego, for all the other questions that are raised in this connection can be reduced to this one.

As the problems relating to the genesis, functions and stability of the super-ego are among the most recent in psycho-analysis, and are still far from being altogether solved, it is little wonder that there is as yet no unanimity of opinion on the practical consequences of the doctrine. It is above all necessary to keep in mind that any such doctrine must proceed from the living facts of observation and can never be given precedence over them.

There are some weighty considerations that would incline one from the beginning to expect a high value from early analyses, so much so that it should need important and unequivocal observations, none of which have been produced up to the present, to change this expectation. The only objections that have so far been brought forward have been of a theoretical and indeed sometimes of an academic order, arguments of the kind that never conduce to final decision.

The considerations alluded to are as follows. Increasing realization of the all-important part played by the super-ego in the formidable resistances with which the progress of an analysis has to contend produces an ever-deepening impression of the strength of the *infantile* super-ego. The aim of analysis might very well be described as the attempt to substitute a rational controlling ego for the nursery conscience, i.e. the super-ego, which has so largely dominated the scene. We are familiar with the characteristic trick that nature plays of insuring its results with lavish precaution. Every act of coitus, in which millions of spermatozoa are expended in the hope that one may succeed, is an illustration of the process I am referring to; though expressed in perhaps misleading teleological phraseology, the metaphor of insurance adequately conveys the idea. The development of the super-ego constantly illustrates the same process. We see every day how children take to heart their necessary lessons with excessive severity, producing a reaction of condemnation far exceeding that which the parent consciously desires to impose. The disproportion between the conscience thus acquired and the impulse it regulates becomes increasingly grotesque as age proceeds, so that in the end we observe the nursery conscience of a neurotic irrationally condemning the most harmless imaginable activities. To shift this burden of condemnation, and to replace it by a rational control in some correspondence with the dictates of reality, constitutes one of the most important aims of the psycho-analytic procedure. When we observe how young children suffer unduly under the same burden the question must naturally arise: Why not relieve them of it at once instead of waiting till later? We are

beginning to be aware of the colossal tasks placed on our children in passing through the evolution demanded of them. It is not very exaggerated to say that we expect them to traverse in five years the stages that it has taken mankind over 50,000 years to traverse in reaching a certain civilized standard. One can hardly believe that our dawning understanding of this momentous process will not result in some relief for the victims of it. By diminishing repressions, and thus furthering mental harmony, psycho-analysis is able to alleviate the task of adult neurotics in coping with their primitive impulses, so it is natural to ask whether it cannot fulfil the same beneficent function with infant neurotics.

Other speakers in this discussion have elucidated in detail the various objections that have been brought forward against child analysis. I am concerned here only with stating my agreement with the main conclusion that issues from the criticisms they have made of these objections. This main conclusion is that the individual objections are throughout based on mistrust of the extent to which the ego (and super-ego) of the young child is sufficiently developed to endure the analytic procedure. Incidentally, it is plain that this remark, like all similar ones in the present contribution, must apply to the older child with even more evident force than to the infant.

The two opposing views can be sharply contrasted in the following way. On the one hand are those, including myself, who are inclined to regard the problems of neurosis and analysis as essentially similar in the young child and in the adult, the obvious differences being of relatively minor importance. That is to say, there is present in both an unsolved conflict between the repressed libido and the ego as spurred on by an unduly severe super-ego. The assumption of psycho-analysis, on which its success depends, is that if the unreasonable demands of the super-ego are brought into closer contact with reality, and therefore with the conscious ego, we can safely trust the ego as a whole to find a more satisfactory way of dealing with the impulses of the id than by the previous method of blind denial and repression. The outside objection to psycho-analysis essentially springs from the fear that the ego cannot be trusted to cope with these impulses, so that it would be safer to keep them buried out of sight as completely as possible and indeed better to reinforce (by suggestion, etc., i.e. by the parental voice) this ostrich policy which the individual naturally follows if left to himself. Theoretically the objection is logical enough, and if the psycho-analyst shows a greater faith in the capacity of the ego than do

his critics, this arises not at all from any special *a priori* faith in human nature, but solely from the results of experience. These teach him beyond all doubt that, provided certain obvious precautions are adopted, the ego can in general be trusted to accede to all reasonable social demands in the control of the instinctual impulses. With children, however, where the educative demands are in any case meeting with the greatest opposition, the cries and fears of the critics are redoubled in intensity. This is comprehensible enough, and it needs a special coolness and courage on the part of the analyst to pursue his investigations in spite of such outcries and to base his conclusions on the former rather than on the latter. The battle of psycho-analysis is being fought out once more with child analysis, though we must be prepared for the possibility that the analytic attitude concerning the stability of the ego is justified only as regards adults. The view here represented is, however, that enough practical experience has already been accumulated, not only to justify the further pursuit of such investigations with children, but to indicate that the fears of the critics are here as unfounded in fact as they have long been proved to be in respect of adults.

The opposing view, as has just been indicated, holds that the ego of the young child is still too weak and undeveloped to take over the responsibility of controlling the impulses of the id without the assistance to be obtained from strong repression. They consider that the child's super-ego is as yet too weak to function independently of the parents, with the influence of whom it is still identical. There is therefore little to be done except to strengthen the moral and pedagogic influence of the parents, wisely modifying this wherever necessary. According to this view, the conflict in the neuroses that undeniably exists even at this early age would appear to be between the child's nature and the parental influence. In other words, it would be essentially an external conflict between individuals and not, as we see with adults, an internal one within an individual mind ; it would thus differ in essence from all other neuroses previously investigated. To allow the child, therefore, and still more to encourage it, to express any hostility or other forbidden attitude towards the parents would on this view be to withdraw the only existing defence against the uncontrolled domination of the primitive instincts and to bring about exactly the state of affairs that critics fear with psycho-analysis in general.

This objection, again, is perfectly logical, and it would be quite valid if it could be shown that the child's self-control is entirely

dependent on the parental influence. That it is so in part is doubtless true, as is the adult's self-control in part dependent on the functioning of various external social authorities. But it is not hard to show that wherever a neurosis exists the conflict is essentially an internal one, and that fear of external authority is mainly a rationalization of the fear of the super-ego, i.e. of the demands of the internal conscience. We know very well that infants assimilate both pleasurable excitations and educative measures in terms of their own instinctual dispositions ; the equating of overheard coitus with sadism and of admonition with castration are classical examples of the process. It is a serious error to identify throughout the child's unconscious and fantastic super-ego with the conscious educative influence of the parents merely because the direction of the two (in checking the primitive impulses) coincides in broad outline.

Whether the analytic view can be extended from the adult to young children, and thus be converted into a harmonious generalization covering the whole field of neurosis from beginning to end, will be decided by experience, and not by argument ; in my judgement, the evidence already accumulated justifies the hope that we shall experience this last triumph of psycho-analytic theory and practice.

CONCLUDING REMARKS ON THE QUESTION OF LAY ANALYSIS

I

SIGM. FREUD

VIENNA

The immediate occasion of my writing the short treatise which gave rise to the present discussion was the charge of quackery brought before the Viennese magistrates against our non-medical colleague, Dr. Th. Reik. It is probably generally known that the action was abandoned after all the preliminary investigations had been conducted and various expert opinions had been taken. I do not think that this result was the outcome of my publication ; the case was probably too unfavourable for the prosecution, and the person who had complained of injury proved untrustworthy. The position adopted in the legal proceedings against Dr. Reik no doubt has not the significance of a decision of the Vienna Court of Justice on a point of principle in the matter of lay analysis. When I created the figure of the ' impartial listener ' in the paper in which I put forward my views on the subject, I had in mind the personality of one of our high functionaries, a man of goodwill and unusual integrity, with whom I myself had had a conversation on the case of Reik, subsequently giving him at his request my private opinion as an expert. I knew that I had not succeeded in converting him to my view, and therefore I did not make my dialogue with the ' impartial person ' end in an agreement between the two speakers.

Nor did I expect that I should succeed in producing among analysts themselves an attitude of unanimity towards the problem of lay analysis. Anyone who compares in the published Discussion the resolution of the Hungarian Society with that of the New York Branch will perhaps assume that my paper has accomplished nothing at all, that everyone continues firmly to hold the opinion which he previously advocated. But I do not think that this is so either. I believe that many of my colleagues will have moderated the extreme bias of their attitude and that the majority have accepted my view that the problem of lay analysis is not to be decided by reference to established customs, but has its origin in a novel situation and therefore demands a fresh judgement.

Further, the turn which I gave to the whole question seems to have commended itself. Now the point which I emphasized was that what

mattered was not that an analyst should possess a medical diploma, but that he should have had the special training needed for the practice of analysis. This suggestion was designed to raise the question which has been so eagerly discussed by our colleagues, namely, what is the most suitable training for analysts. I said, and I still hold to the opinion, that it is not the training prescribed for future physicians. The so-called medical training seems to me a toilsome and circuitous route to the profession of analyst: true, it gives him much that is indispensable, but over and above this it burdens him with too much that he can never employ and involves the danger that his interest, as well as his mode of thought, will be deflected from mental phenomena. The analyst's curriculum has yet to be planned; it must comprise matter relating to the mental sciences—to psychology, to the history of civilization, to sociology—no less than that relating to anatomy, biology and evolution. There is so much to learn here that we are justified in omitting from the course of instruction anything which bears no direct relation to analytical work and can contribute only indirectly, like every other study, to the discipline of the intellect and the training of observation by means of the senses. It is easy to object to this suggestion that such analytical training colleges do not exist, that this is an ideal demand. Yes, indeed; it is an ideal, but one which can be realized and must be realized. Our Training Institutes, despite all the inadequacy inevitable in these their early days, are nevertheless already beginning this realization.

It will not have escaped my readers that in what I have just said I have assumed as self-evident something which is still hotly contested in the discussion. I mean, that psycho-analysis is not a particular branch of medicine. I do not see how anyone can refuse to recognize this. Psycho-analysis is part of psychology—not even of medical psychology in the old sense of the term, or of the psychology of morbid processes, but, simply, of psychology. It is certainly not the whole of psychology but its substructure, perhaps the foundation of the whole. We must not be misled by the possibility of applying it to medical purposes; electricity, also, and the Röntgen rays have been applied in medicine, yet the science to which they both belong is surely physics. Even historical arguments cannot alter the fact that they do so belong. The whole theory of electricity originated in an observation made in relation to a preparation of nerve and muscle tissue, but it surely does not occur to anyone at the present day to maintain that that theory is a part of physiology. In regard to psycho-analysis it

is urged that it was invented by a physician whilst he was endeavouring to help sick persons. But obviously this is quite irrevelant. Besides, this historical argument is thoroughly dangerous. We might carry it further and recall how unfriendly, indeed how malicious, has been the attitude of rejection adopted towards analysis by the medical faculty from the very beginning; it would lead to the conclusion that they had no claim to analysis to-day either. And really (though I repudiate any such conclusion) I do still doubt to-day whether the physicians' desire for psycho-analysis is, from the standpoint of the theory of the libido, to be traced to the first or the second of the early stages distinguished by Abraham—whether it is a question of forcibly possessing themselves of the object with a view to its destruction or to its preservation.

To dwell for one moment on the historical argument: since it concerns myself I may throw some light on my own motives for anyone who is interested in the matter. I have been engaged in the practice of medicine for forty-one years and my self-knowledge tells me that I have never really been a true physician. I became a physician owing to a compulsory deflection of my original purpose, and the triumph of my life is this: that after a very long way round I have regained the path in which I began. I do not remember in my childhood any craving to help suffering humanity; my sadistic tendencies were not very strong, and so there was no need for this particular derivative to develop. Nor did I ever play 'the doctor-game'; my infantile curiosity obviously took other directions than this. In my youth the craving to understand something of the riddles of this world and perhaps to contribute something myself to their solution was overwhelming. To become a member of the medical faculty seemed the best way, but, after that, I made the attempt—in vain—in zoology and chemistry, till under the influence of Brücke, the greatest authority who ever impressed himself on my mind, I finally concentrated on physiology, which at that time, of course, was too closely restricted to histology. By that time I had passed all my medical examinations without interesting myself in anything relating to medical practice, till my revered teacher pointed out to me that my straitened financial circumstances must preclude me from devoting myself to theory. So from the histology of the nervous system I passed to neuropathology, and there received fresh stimuli which led me to work at the neuroses. But I do not think that my lack of the true disposition of a physician has greatly injured my patients. For

patients do not gain much if the therapeutic interest of the physician is affectively overstressed. It is best for them if he remains cool and works with the greatest possible exactness.

The foregoing account has certainly not contributed much to the elucidation of the problem of lay analysis. It was intended only to help to justify me personally when I of all people espouse the view that psycho-analysis has an absolute value independently of its application to medicine. But here it will be objected that it is an academic question, of no practical interest whatsoever, whether psycho-analysis as a science is a branch of medicine or of psychology. The point in dispute, I shall be told, is something different: the application of analysis in treating sick persons and, in so far as analysis claims this, it must be content to be absorbed into the science of medicine as a special branch, like Röntgenology, and to submit to the rules which apply to all therapeutic methods. I acknowledge it, I admit it, I only want to guard against science being slain by therapy. Unfortunately all comparisons hold only up to a certain point. When that is reached, the two factors in the comparison diverge. The case of analysis is not the same as that of Röntgenology. Physicists have no need of sick people in order to study the laws of the Röntgen rays. But analysis has no other material than the mental processes of man, and can be studied only in relation to man. Because of special circumstances, which will readily be comprehended, a neurotic provides far more instructive and accessible material than a normal person, and, if we withhold this material from those who desire to learn and apply analysis, we have curtailed their opportunities for training by a good half. Of course I am far from demanding that the interest of the neurotic patient should be sacrificed to the analyst's training and to scientific research. My little work on the question of lay analysis was intended to show precisely this: that, if certain precautions be observed, the interests of both can very well be harmonized and that that of the physician, if rightly understood, is not the last to be served by such a solution.

I myself have enumerated all these precautions, and I may say that here the discussion has added nothing fresh. I should also like to draw attention to the fact that frequently the points upon which stress has been laid are not in reality the most important. All that has been said about the difficulty of differential diagnosis and the uncertainty in forming an opinion of physical symptoms is correct. These things necessitate medical knowledge or medical intervention. But the

number of cases in which such doubts do not arise at all, and a physician is unnecessary, is surely incomparably greater. From the scientific point of view these cases may be very uninteresting ; in life they play a sufficiently important part to justify the work of lay analysts, who are perfectly competent to deal with them. Some time ago I analysed a colleague who displayed a peculiarly strong dislike of the idea that anyone who was not himself a physician should treat patients. I took the opportunity to say to him : ' We have now been working for more than three months. At what point in the analysis have I had occasion to use my medical knowledge ? ' He admitted that there had been no occasion for it.

Again, I do not attach much weight to the argument that, because the lay analyst must be prepared to consult a physician, he will not acquire any authority over the patient or be held in any higher regard than a barber-surgeon, a masseur or the like. Here again the analogy is probably not exact, apart from the fact that patients usually recognize authority according to the transference of affect and that the possession of a medical diploma does not impress them nearly so much as physicians imagine. A professional lay analyst will have no difficulty in winning the regard due to him as one who holds a secular cure of souls. The phrase ' a secular cure of souls ' might indeed be used to describe the function which the analyst, whether he be a medical man or a layman, has to fulfil towards the public. Friends of analysis amongst the Protestant and, of late, the Catholic clergy often set their parishioners free from their inhibitions by first giving them some analytic insight into their conflicts and afterwards confirming their faith. Our opponents, the individual psychologists of Adler's school, try to bring about this change in persons who have become unstable and incapable, by rousing their interest in social fellowship, having first illuminated for them one single corner of their mental life and shewn them how their egoistical tendencies and want of confidence have contributed to their illness. Both these methods, which derive their power from their connection with analysis, have their place in psychotherapy. The goal which we who are analysts set before us is an analysis of the patient which shall be as complete and as deep as possible. We do not try to relieve him by causing him to be received into the Catholic, Protestant or Socialistic communion, but we endeavour to enrich him from within his own personality by making accessible to his ego the energies which have been bound and have remained inaccessible in his Unconscious owing to repression, and the

other energies which the ego has been obliged to dissipate unprofitably in order to maintain the repressions. In so doing we are exercising the cure of souls in the best sense. Have we in this set ourselves too high an aim ? And is even a majority of our patients worth the trouble which we take in this work ? Would it not be a more economic plan to prop up the defective mental structure from outside rather than to remould it from within ? I cannot tell : but I do know something else. Psycho-analysis from the beginning has constituted a point of union between healing and research. Knowledge brought success : we could not treat a patient without learning something new, and every fresh piece of insight produced its beneficial effect. Our analytic procedure is the only one to which this inestimable conjunction is assured. Only when we are exercising the analytic cure of souls do we deepen that knowledge of the mental life of mankind which is just dawning upon us. This prospect of scientific gain was the principal, most gratifying feature of analytic work. Is it right for us to sacrifice it to any practical considerations whatsoever ?

In this discussion certain things have been said which lead me to suspect that my treatise on the question of lay analysis has surely been misunderstood on one point. A defence has been set up for the physicians against me, as though I had made a generalization to the effect that they were unfit to practice analysis and had given the word that recruits from the ranks of the medical profession should be excluded. Now that is no part of my intention. Such an impression was probably due to the fact that in my essay, written as it was for controversial purposes, I was forced to state that untrained medical analysts were even more dangerous than lay analysts. I might make my real opinion on this question clear by repeating a cynical remark which once appeared in *Simplicissimus* on the subject of women. A husband was complaining of the weaknesses and the intransigence of the fair sex, whereupon another man replied : ' But, after all, a woman is the best thing we have of *the sort* '. I admit that, as long as schools such as we desire for the education of analysts do not exist, medically trained persons are the best material for future analysts. Only we may demand that they should not let their preparatory training in medicine take the place of a further training in analysis, that they should overcome the one-sidedness which is fostered by training in medicine, and that they should resist the temptation to flirt with endocrinology and the autonomic nervous system, when what is required is the apprehension of psychological facts by the aid of

psychological concepts. Similarly, I share the expectation that all the problems relating to the connection between mental phenomena and their organic, anatomical and chemical bases can be attacked only by persons who have studied both, that is to say, by medical analysts. But we ought not to forget that this is not the whole of psycho-analysis, and that on its other side we can never dispense with the co-operation of persons trained in the mental sciences. For practical reasons we have, even in our writings, fallen into the habit of differentiating between medical and applied analysis. This is not correct. In reality the dividing line lies between scientific psycho-analysis and its various applications to medical and non-medical spheres.

In this discussion it is our American colleagues who have most summarily rejected lay analysis. I think it may not be superfluous to make a few remarks in reply to them. It is hardly a perversion of analysis to controversial ends if I express the opinion that their resistance is entirely due to practical considerations. In their country they see that a great deal of mischief is done and many abuses are committed through analysis by lay analysts and that, consequently, both the patients and the reputation of analysis suffer injury. So it is quite understandable that in their indignation they should dissociate themselves widely from these unscrupulous and mischievous persons and should wish to exclude the laity from any participation in analysis. But this circumstance in itself suffices to detract from the significance of their attitude. For we must not decide the question of lay analysis having regard to practical considerations alone, nor can it be determined for us simply by the local conditions in America.

Our American colleagues' resolution against lay analysts was prompted essentially by practical motives; yet it seems to me unpractical, for it cannot alter any one of the factors which govern the situation. It is in some sort equivalent to an attempt at repression. If we cannot hinder the work of lay analysts and if the public does not support us in our struggle against them, would it not be more expedient to take into account the fact of their existence, providing them with opportunities for training, acquiring an influence over them and holding out as an incentive the possibility of the approval of the medical profession and of their admission to co-operation, so that it would be to their interest to raise their moral and intellectual standard?

II

M. EITINGON

BERLIN

The recent discussion on lay analysis has resulted in many quarters (especially amongst our English colleagues) in a very thorough and detailed consideration of most of the factors which have to be taken into account, and also, on the other hand, in a simple and descriptive elaboration of the main problem (Dr. Horney). Having followed the discussion attentively, we shall note that there are two points to be stressed when we realize that we are dealing with the therapeutic application of analysis and with a question relating to our training technique: namely, what conditions are to be imposed on candidates who aspire to train as practising analysts? In the discussion the desirability has so far never seriously been questioned—on the contrary it has in general been more or less expressly emphasized—of such candidates having a preliminary training in medicine, which should be as good as possible. On the other hand it is admitted on all sides that a whole series of psychoneuroses, and precisely those which come within the true sphere of psycho-analysis as a therapy, can be successfully treated not only by physicians, but by trained non-medical practitioners, provided only that they are thoroughly instructed in analysis. Upon the opportunity for such training hangs not only the future of psycho-analysis as a form of treatment, but also as a science with all its possible applications, whether already initiated or still to be developed in the future. To provide these opportunities of training has, therefore, of late years been the principal task and the most pressing care of our organization, and particularly of the body created by it for this purpose, namely, the International Psycho-Analytical Training Commission. Now, if our candidates are to be well taught, we must give the fullest consideration not only to improving the training in our own science, which is so fundamentally novel and revolutionary, but also to the individual requirements of the special fields of knowledge to which we desire to teach students to apply analysis. For there we have to deal with branches of learning and orders of facts which are, so to speak, pre- and extra- analytical—are so inevitably, and for the most part must remain so.

I have said that it can hardly be doubted, from any point of view, that there are many very important psycho-neuroses which can be successfully treated by trained non-medical practitioners who are

thoroughly instructed in analysis. Nevertheless, all parties have made it no less clear that, even in such cases, the non-medical analyst must be assisted both before and during the analysis by a physician, and by this we mean naturally a physician versed in analysis. It will be his business to diagnose and to decide on the advisability of treating a patient by analysis and, further, to give his opinion on intercurrent somatic complications which may arise during the analysis. In other words, we can only conceive of the lay analyst in association with his medical colleague and as working in co-operation with him. Is it altogether utopian to suggest that what we have to aim at, if there is to be a more ideal state of affairs in the future, is that the practising analyst's plan of procedure and training should be so framed as to substitute for the co-operation of non-medical analyst and physician the combination in a single person of an equally good analytical and medical training ?

In making this suggestion I am constantly bearing in mind that, while thus practically desiring to anticipate a better future, we must give due value to two considerations, if the progress of psycho-analysis is not to be seriously impeded. In the first place we must never for a moment lose sight of the fact, and the reasons underlying it, that, within a very short time of the inception of what we call the psycho-analytical movement, a number of ' laymen ' were rendering the most valuable services in its further development on both the theoretical and the practical sides, and that they have continued to do so right up to the present day.

On the other hand, we must not for an instant forget the present unsatisfactory state of affairs in medicine, both from the purely scientific and the instructional point of view. We must continually keep alive and foster this dissatisfaction with a system by which psychological considerations are held at arm's length from, or repudiated by, medicine, if they have not previously been stifled by it.

Having regard to the particular requirements of the special task under discussion, the present inadequacy of medical training and the hope that at a time not too far distant we may look for its reformation, we are venturing in the name of the International Psycho-Analytical Training Commission to lay before the Congress the two following resolutions :—

1. The Congress instructs the Training Committees of the Branch Societies to insist that candidates for training in psycho-analytic therapy shall possess or shall acquire full medical qualifications, but

that no candidate shall be rejected solely on the ground of the lack of such qualifications, if he possesses special personal suitability and a previous scientific education of a corresponding standard.

2. While this is the general principle to be observed, each Branch Society shall determine independently its conditions of admission to training. In the case of candidates from a foreign country the conditions laid down by the Training Committee in his native country are to be taken into account together with those valid in the other country, and the Training Committee of the candidate's country, is then to be notified that he has been accepted. Any protests are to be addressed to the International Training Commission.

SHORTER COMMUNICATIONS

A DREAM FROM AN ELEVENTH CENTURY JAPANESE NOVEL,[1]

In the summer of 1925 there appeared in the English translation of Arthur Waley, *The Tale of Genji*, a large Japanese work in novel form, written 1001–1015 A.D., by Lady Murasaki, a member of the Emperor's court. Despite its sheerly poetic and narrative beauty, and its translator's emphasis of these qualities, it is in its psychological aspect that the tale of the largely amorous adventures of Genji, a Japanese Don Juan, is of particular interest to us. Many passages might be quoted; the following evaluation of a dream has seemed to me especially noteworthy.

Aoi, the wife of Genji, has just died; and it is assumed here, as throughout the book, that the hatred of an enemy, known or unknown, has killed her. Lady Rokujo, the mistress of Genji, is aware of the fact that Aoi's death is attributed to the machinations of her 'living spirit'. She broods upon the nature of her feeling toward Aoi, but is unable to discover in it anything save intense unhappiness. 'Yet she could not be sure whether somewhere in the depths of a soul consumed by anguish some spark of malice had not lurked'. Hereupon she recollects a dream:

'It seemed to her that she had been in a large magnificent room, where lay a girl whom she knew to be the Princess Aoi. Snatching her by the arm she had mauled and dragged the prostrate figure, with an outburst of brutal fury such as in her waking life would have been utterly foreign to her. Since then she had had the same dream several times. How terrible! It seemed then that it was really possible for one's spirit to leave the body and break out into emotions which the waking mind would not countenance'.

The comment of the translator on this particular, one might almost say psychoanalytic, quality of Murasaki's insight is as follows:

'She (Murasaki) is modern again owing to the accident that medieval Buddhism possessed certain psychological conceptions which

[1] *The Tale of Genji*, by Lady Murasaki, translated from the Japanese by Arthur Waley. London, George Allen and Unwin, Ltd. First published, June, 1925. Three volumes have appeared; the others are to follow.

happen to be current in Europe to-day. The idea that human personality is built up of different layers which may act in conflict, that an emotion may exist in its fullest intensity and yet be unperceived by the person in whom it is at work—such conceptions were commonplaces in ancient Japan. They give to Murasaki's work a certain rather fallacious air of modernity '.

But to us as analysts it cannot seem ' accidental ' that facts which were axiomatic in ancient Japan should coincide with the results of our own laborious scientific observation, contrary as these have always been to prevalent occidental beliefs. An investigation of these similarities, especially as regards the unconscious, its appearance in dreams, and dreams themselves as the expression of wishes or ' emotions which the waking mind would not countenance ' would seem to promise much, despite the comparative inaccessibility of the actual sources (many of which, however, are available in translation), to all except such rare Oriental scholars as Mr. Waley.

Ruth Jane Mack (New York).

SCENT IN A SYMPTOMATIC ACT

A patient, a girl aged about twenty-three, came for her usual daily visit, and as she lay down on the couch remarked that she could not work, felt miserable, irritable, and ' fed up ' with things generally. She then said, ' such a dreadful thing has happened to-day, I spilled a bottle of scent over myself, and I have been so self-conscious of it all day '.

It appeared that when she had dressed on getting up in the morning, she had gone to a case in which she kept her scent bottle, and in removing the little stopper had somehow or other dropped the bottle and the contents went on to her. She went down to breakfast and asked her mother if she noticed anything about her, but her mother noticed nothing, so she concluded that the scent on her was not noticeable to others. Later in the day, however, when in a room with some other girls, one of them remarked what a strong smell of scent there was, and my patient became very self-conscious and ashamed. I did not detect any smell of scent while she was in my room. On leaving, however, she implored me to open the window before the next patient came in.

After having told me about the accident with the scent bottle she remarked that she had been having terrible dreams lately, and the one she had had on the previous night was worse than usual. She said

she had first of all dreamed, ' something about a detective whom she was with ' ; but she could not remember anything more about this part of the dream. She said that she had also dreamed that she was with a girl, and she and the girl were kissing each other passionately on the breasts ; then she was with another girl whom she was kissing passionately on the back of the neck.

The detective in the first part of the dream the patient immediately associated with me.

I must mention that the sitting on the previous day had been taken up with an analysis of scent which was leading to homosexuality in the patient, to heterosexuality and attraction by means of scent and bodily odours, and to a narcissistic pleasure in smell.

She said that violets were her favourite scent. She called the inside of the flower of the violet ' honey guides ', and associated these ' guides ' with axillary and pubic hair in women. Violet was also the favourite scent of a woman to whom she was homosexually attracted. She said that she used scent more particularly during the menstrual period, so as to disguise any odour that might arise from the menstrual flow.

The woman to whom she was homosexually attracted had given her the bottle of scent which she spilled. It was called ' Houbigant '.

There seems to be sufficient material here to explain the spilling of the scent. In the first place the dream of the detective (myself) and the patient suggests the idea that we were ' on the scent '. By spilling the scent on to herself she indicates that she is the person to whom the scent leads, that the analysis is progressing rapidly, and that by spilling the scent away from her it expresses a putting off the scent, or getting rid of the scent. Again, the spilling of the scent on to herself was to be an attraction to me for sexual relations ; but on the other hand was a refusal of sexual relationships in that the scent was an indication that she was menstruating. It was also an admission of and turning away from her homosexuality. Also the name of the scent, ' Houbigant ', could be translated, ' You be gone ' (base thoughts, etc.).

Women in general have a great tendency to make use of scent, and especially at their monthly periods. The reason they give for its use at this particular time is to disguise any odours that might emanate from the menstrual flow. Outwardly they are very sensitive lest such odours should be detected and therefore that it should be known they are menstruating. I have frequently asked women, and for the

matter of that men also, if they have ever been able to detect any odour whereby they could conclude a woman was menstruating, and I have never yet met a person who could satisfactorily diagnose this state of affairs when meeting women in ordinary social intercourse. Now the peculiar thing to notice is that whereas women are so sensitive regarding menstrual odours, yet numbers of them, and the most sensitive ones especially so, take steps to notify the fact that they are menstruating by being a little more lavish with scent than usual. For whereas the ability to detect menstruating women by the sense of smell is exceedingly difficult, yet it is very widely known that women use scent for disguising the likelihood of such odours being detected and therefore the fact of their menstruation known.

The male of many species of animals is attracted to the female during the rutting period by the odours arising from the menstrual flow. It seems probable, therefore, that the use of scent may have a phylogenetic origin, and that unconsciously women in using scent, and particularly during the menstrual period, are really trying to attract the man sexually by means of his olfactory organ, just as happens in the animal kingdom. That women unconsciously recognize certain odours arising from them as sexually attractive to men is evident from the great care that many of them take regarding their choice and use of scent. In many women sexual excitation is most marked during the menstrual flow, and thus this would be an additional reason for the use of scent.

Douglas Bryan (London).

SLIPS OF THE TONGUE IN MEDIÆVAL ENGLISH LITERATURE

Writers of plays in the late Middle Ages were not unaware of the importance of slips of the tongue as a dramatic device for the revelation of character, as is shewn by the three examples given here from plays of the sixteenth century.

The first example is from *Respublica*.[1] Avarice introduces Adulation under the name of Honesty to Respublica; she welcomes him and promises him reward, whereupon he says:

Adul. I thanke yo(ur) grace. And I will for youe take suche pain that, ere I deserve one, ye shall geve me twayne.

Avar. Honestie, yo(ur) tong tripth.

Resp. howe saide ye, take such paine?

[1] *Respublica*, ed. Leonard A. Magnus, London, 1904, lines 560 ff.

Adul. That ere ye geve me one, I will des(er)ve twaine.

The second example is from *Kynge Johan*.[2] Sedition is trying to get into the good graces of Kynge Johan and tells him he must go away and put on some religious garb, and then he will return ; Kynge Johan commands him to stay, and Sedition says :

Sed. I have a great mynd to be a lecherous man——
A wengonce take yt ! I wold saye, a relygyous man.
I wyll go and cum so fast as evyr I can.

The third example is from the *Interlude of the Four Elements*.[3] Sensual Appetite is endeavouring to lead Humanity astray and invites him to go to the tavern with him :

Hum. I am content so for to do,
If that ye will not fro me go,
But keep me company still.
Sen. Company, qutha ? then that I shall point-device,
And also do you good and true service,
And thereto I plight my troth !
And if that I ever forsake you,
I pray God the devil take you !
Hum. Marry, I thank you for that oath.
Sen. A mischief on it ! my tongue, lo !
Will trip sometime, whatsoever I do ;
But ye wot that I mean well.
Hum. Yea, no force ! let this matter pass. . . .

It will be seen that the transposition of words in the first example expresses the real thoughts of Adulation ; how, indeed, could he avoid such a natural slip ? In the second example the similarity in sound of the words *lecherous* and *relygyous* is so close that Sedition almost inevitably says the wrong one and expresses his actual desire. The third example is a little more involved : Sensual Appetite wishes to appear to Humanity as a righteous man, and it occurs to him to use the phrase ' I pray God ', but then his habitual method of thought and speech asserts itself and he says ' the devil take you '. He is so confused by the slip he cannot think of a better way to correct it than the vague ' ye wot that I mean well '.

George M. Rutter (Cambridge, Mass.).

[2] John Bale's *Kynge Johan* in *Pre-Shaksperean Drama*, ed. John M. Manly, Boston, 1897, vol. i., lines 304–306.

[3] Robert Dodsley's *Old English Plays*, ed. W. C. Hazlitt, London, 1874, i., 23.

BOOK REVIEWS

The Ego and the Id. By Sigm. Freud, M.D., LL.D. Authorized translation by Joan Riviere. International Psycho-Analytical Library, No. 12. (The Hogarth Press, and the Institute of Psycho-Analysis, 1927. Pp. 88. Price 6*s*.)

This short but difficult and pregnant work seems destined to mark an epoch in the history of psycho-analysis. On the one hand it throws for the first time some real illumination upon certain most important aspects of the mind which were hitherto wrapped in obscurity, while on the other hand it opens up many intricate new problems, the investigation of which will probably afford material for speculation and research for many years to come. The German original appeared in 1923 under the title of *Das Ich und das Es*, and it is to be regretted that the English translation should thus have been delayed for over three years—years during which the ideas and concepts elaborated in the book have already deeply influenced the outlook, the modes of thought, the terminology and even the therapeutic aims of psycho-analysis. It may indeed be taken that the main principles which Freud here lays down are familiar to readers of this JOURNAL, in which a number of papers have already appeared dealing with these principles—by way of application, extension, modification or criticism; a fact which in itself at once indicates the interest and utility of these principles both for the more helpful classification and deeper interpretation of existing knowledge and as a means of guiding observation and provoking thought.

In spite of much complexity of detail the main purpose of the book is fairly simple. It consists in an endeavour to establish a division of the mind into three main entities—the id, the ego, and the super-ego. Briefly and dogmatically (and therefore to some extent inadequately) it may be said that the id is the great reservoir of instinctual energy, that the ego is the percipient aspect of the mind, that portion which produces adaptation to reality, while the super-ego corresponds to the moral factors which control in a social sense the adaptations of the ego.

The distinctions between these three entities is, however, by no means always easy and clear-cut. The id appears to be the widest concept, while the ego and the super-ego represent successive later differentiations of the id. Thus the ego is in one sense a part of the id; it is ' that part of the id which has been modified by the direct influence of the external world ' (p. 29). ' It is not sharply separated from the id, its lower portion merges into it ' (p. 28). The super-ego in its turn is ' a part of the ego ' (p. 78). This might lead us at first to suppose that the super-ego is in its nature more

remote from the id than is the rest of the ego, or the ego as a whole. The contrary, however, is the case ; in certain ways the super-ego stands nearer to the id than does the rest of the ego. ' The ego forms its super-ego out of the id ' (p. 52). ' The super-ego is always in close touch with the id and can act as its representative in relation to the ego. It reaches deep down into the id and is for that reason further from consciousness than the ego ' (p. 69). Here, as often elsewhere, simplicity and perspicuity of theory are not to be found in Freud's writing ; a fact which has of course not failed to draw the attention of hostile critics. To a great extent, however, this want of clarity in theory has arisen through the constant endeavour to keep in touch with facts ; the theories are treated as temporary scaffolding rather than as permanent structure. As a recent commentator has well put it, ' Freud's work has been carried out along the road of clinical observation and he has made and modified his concepts as he went along. It is to this circumstance that the fluidity and plasticity (of these concepts) are presumably to be ascribed. The modification of concepts in the light of further facts of observation is of course an unimpeachable proceeding, but it carries with it the possibility that the concepts may ultimately have ascribed to them a complex mass of attributes which do not easily hang together. Such a characterization, while it facilitates the fitting of the observed facts into the theories, inevitably blurs the precision and definition of the latter '.

As might be expected from the previous history of psycho-analysis, the id (which has become the accepted English equivalent of the German *Es* —itself a term derived from Groddeck's *Buch vom Es*) is on the whole the easiest of the three concepts. It is also the one that receives the least attention in the present book, in which little is added to our knowledge of instinctual energies as such. The absence of a precise definition of the id does, however, create some difficulty. The nearest approach to a definition occurs on page 27, where the id is referred to as ' the other part of the mind into which (the ego) extends and which behaves as though it were unconscious '. Here there is no direct reference to the instincts, though such a reference seems to be implied, since just before these words approval is given to the statement of Groddeck ' that the conduct through life of what we call our ego is essentially passive and that we are " lived " by unknown and uncontrollable forces.' The id does in fact seem to have been usually taken as consisting wholly or in part of the instinctual energies themselves. But this view would seem to require some modification in view of the statement on p. 66 that the id struggles against the libido with a view to mastering the tensions which the libido produces. The id is here conceived as distinct from the libido itself, though as aiming at the gratification of the libido. It is clear that there is here some need of further differentiation of concepts with a view to envisaging more precisely the

relation of the id to the libido and determining where exactly the ' tensions ' occur, whether in the id, the libido, or elsewhere.

The functions of the ego (as distinct from the super-ego) that emerge from the discussions in his book are chiefly connected with perception. ' The ego is first and foremost a body ego ; it is not merely a surface entity, but it is itself the projection of a surface ' (p. 31). In explanation of this perhaps somewhat obscure statement an authorized note by the translator tells us that ' the ego is ultimately derived from bodily sensations, chiefly from those springing from the surface of the body. It may be thus regarded as a mental projection of the surface of the body, besides . . . representing the superficies of the mental apparatus '. As a ' surface entity ' it would appear to possess three surfaces, at which it comes into contact with outer reality, with the id and with the super-ego respectively. As subject to influences from these three quarters it is ' a poor creature owing service to three masters and consequently menaced by three several dangers ' (p. 82). ' In a sense its task appears to lie in finding some means of reconciling the often contradictory demands made upon it by these three masters. In accomplishing this task, however, it becomes an organ of great importance, normally it has more or less complete control of motility, and in acquiring this control it develops the process of thought ' (p. 81). The ego is, in fact, as the late James Glover has emphasized in an illuminating paper,[1] the representative of the ' reality principle ' as exemplified in perception, memory and thought. In so far as it may be regarded as active at all, it is ' modelled on the reactive rather than the " impulsive " aspects of instincts . . . its activities are based phylogenetically on the function of responses to external stimuli '. In this respect Freud explicitly corrects a view formerly expressed in his paper on ' Narcissism ; an Introduction ' [2] to the effect that the ' testing of reality ' was a function of the super-ego.

The concept of the ego has thus been both enlarged and more clearly defined, and has therefore become correspondingly more useful, though it is, of course, obvious that much further work of classification remains to be done before psycho-analytical views concerning the various functions and relations of the ego can become crystallized into a really consistent and integrated scheme.

It is, however, as regards the super-ego (ego-ideal) that the most important contributions of the book are made. The concept was originally introduced as far back as 1914 in the above-mentioned communication on narcissism, and the present treatment is only an elaboration of what was already contained in that extremely pregnant paper. The new features of chief importance may perhaps be reduced to three :

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[1] International Journal of Psycho-Analysis, Vol. VII, p. 414.

[2] *Collected Papers*, Vol. IV.

(1) Greater emphasis is laid upon the censoring function of the super-ego (the fact that the super-ego is also an object to which libido is directed—the most prominent feature in the treatment of the subject in ' Narcissism ' and in ' Group Psychology and Analysis of the Ego '—being here left rather in the background).

(2) It is shown that the nature of the super-ego is largely determined by the introjection of the parent imago, an introjection that is itself intimately connected with the passing of the Œdipus complex. In the ' Narcissism ' paper the super-ego was indeed already stated to be due to the influence of parental criticism. The way in which this ' influence ' comes to be permanently incorporated in the super-ego is, however, now made much more precise by applying the idea of introjection of a loved lost object that was first brought forward in the paper on ' Mourning and Melancholia '.[3] It now appears that this process of introjection of a lost love object is of far more general importance than was at first supposed ; it probably plays a part in every abandonment of a love object, and its early occurrence in connection with the Œdipus complex at a time when the ego is still weak and unresistant leaves that special imprint on the mind to which the peculiar character of the super-ego is due.

(3) Owing to its connection with the Œdipus complex the super-ego is itself to a large extent unconscious. Here, it would seem, is the most signal contribution to psycho-analytical theory that the book contains. Ever since the first tentative beginnings of psycho-analysis it has remained something of a paradox that we know more about the repressed contents of the mind than about the forces that produce the repression. Here, in the essentially unconscious nature of the super-ego (through which—at least indirectly—repressions are produced), there seems to lie at any rate a partial solution of this mystery. At the same time our dawning understanding of the nature of this unconscious super-ego at once greatly widens our conception of the contents of the unconscious and removes a certain one-sidedness which this conception has hitherto possessed. In Freud's own words, ' Now that we have embarked upon the analysis of the ego we can give an answer to all those whose moral sense has been shocked and who have complained that there must surely be a higher nature in man : " Very true," we can say, and " here we have that higher nature in this ego-ideal or super-ego, the representative of our relation to our parent. When we were little children, we knew these higher natures, we admired them and feared them ; and later we took them into ourselves " ' (p. 47). ' If anyone were inclined to put forward the paradoxical proposition that the normal man is not only far more immoral than he believes, but also far more moral than he has any idea of ; psycho-analysis which is responsible

[3] *Collected Papers*, Vol. IV, p. 152.

for the first half of the assertion would have no objection to raise against the second half ' (p. 75).

The unconsciousness of the super-ego is, however, not merely of startling importance for theory, but has also therapeutic bearings. It emphasizes the significance of the change from an analysis primarily directed against symptoms to an analysis directed primarily against resistances—a modification which is of long standing in the history of psycho-analysis, but of which we are only now beginning to appreciate the full meaning. The really essential factor in the resistance is the censoring attitude on the part of the super-ego. It is in the last resort the ' moral ' factor, the unconscious need for punishment, that often reveals itself as the most powerful of all obstacles to recovery, more powerful than such familiar ones as narcissistic inaccessibility, the assumption of a negative attitude towards the physician or a clinging to the advantages of the illness (p. 71). The economic and dynamic factors in this need for punishment vary both quantitatively and qualitatively from one form of neurosis to another, and Freud has much of importance to say about these differences (pp. 70–79). As regards the general harshness and severity of the super-ego which ' can be hyper-moral and then becomes as ruthless as only the id can be ' (whereas the ego ' strives to be moral ' and the id is ' totally non-moral '), he is of opinion that it results from the desexualization involved in the process of introjection that is operative in the formation of the super-ego. Through this desexualization the death instincts are freed from their admixture of libido and proceed to exercise their natural function unchecked by the opposing tendencies of the erotic constituents (p. 80).

In a recent illuminating review of the whole subject by Ernest Jones [4] an alternative explanation has been advanced to the effect that this harshness of the super-ego is due not so much to loss of the erotic elements, but to an increasing admixture of ego-instincts consequent upon regression to an earlier sadistic phase, a process of regressive ' fusion ' rather than of regressive ' diffusion ' as in Freud's view. Both views agree that the condition is intimately dependent upon a decline in the relative influence of libido at the allo-erotic level and a corresponding increase in the relative influence of ego (death) instincts. Perhaps ultimately the difference between the two views is quantitative rather than qualitative. Certainly it is impossible to neglect the influence of the libido elements in the total effect produced by the tyranny of the super-ego, and Freud himself in the very last words of the book warns us against the ' risk of valuing too cheaply the part played by Eros '. It is probably true to say that in all cases the libido obtains gratification of some kind and in some way from

[4] International Journal of Psycho-Analysis, Vol. VII, p. 303.

the excesses of the super-ego, but probably the relation of this gratification to these excesses varies very much in closeness. In the cruelties of the moral attitude as directed towards others (an attitude which has obviously much in common with the attitude of the super-ego towards the self) the very frequent presence of a sadistic (and therefore a sexual) element is beyond all doubt. In the internally directed cruelties of the super-ego the sexual element is often not so easily to be detected, and it seems probable that in many cases the libido does not so much find gratification directly in and through these cruelties themselves, but rather finds that these cruelties are a condition of its obtaining gratification. To follow a useful formulation of Alexander's,[5] there may be said to exist something in the nature of a secret alliance between the super-ego and the id, so that the severities of the super-ego and the gratifications of the libido become connected and mutually dependent. The closeness of the connection, however, may probably vary from the one extreme in which the libido actually is gratified by the severities of the super-ego in and for themselves, to the other extreme in which gratification and suffering are quite distinct in their expression, but in which a given amount of gratification seems to be only permitted when it is, as it were, paid for by a given amount of suffering (no matter what the actual nature of the gratification and the suffering may be).

The importance of these various forms of co-operation between the super-ego and the id is by no means confined to psycho-therapy. Although the wider bearings of the subject are scarcely touched upon in the present book, it is clear that the issues raised are of great significance from the ethical and social point of view. The sadistic element in morality, whether directed against the self and manifesting itself as asceticism or directed against others and manifesting itself as legal, moral, or religious persecution is obviously a very powerful barrier in the way of ethical and social progress. The alliance between morality and libido would seem often to result in a peculiarly stable compound which constitutes as great an obstacle to the social reformer as to the psycho-therapist. The breaking up of this alliance will be just as necessary for the attainment of a healthier and freer attitude in the case of the social mind as in the case of the individual mind ; in both cases this breaking up can, it would seem, only be achieved by producing a more tolerant attitude on the part of the moral element (the super-ego) and attaining a higher and more allo-erotic level of satisfaction for the libidinal elements, so that the whole attitude becomes less markedly ambivalent.

Viewed in this light the super-ego certainly gives the impression of an archaic factor that has to some extent to be outgrown in the course of pro-

[5] International Journal of Psycho-Analysis, Vol. VII, p. 341.

gressive development—individual or social. In this respect it resembles the parent-imago from which it is formed. To be really progressive, free and independent, an individual must shake off his infantile attachment to, and dependence on, the parents—whether as real individuals, as memories of these individuals, or as incorporations of these individuals within the self. The line of progress as indicated by psycho-analysis, both for the individual and for the race, would seem to consist in an increasing control by the ego, not only, as has long been recognized, over that reservoir of instincts which is now termed the id, but also over that rigid harsh and unadaptable factor of moral control that is constituted by the super-ego. Combining an older suggestion of Freud's with a recent one of Glover's, it may be said that the social counterparts of the id, the super-ego and the ego, are to be found respectively in magic, in religion and in science.

As indicated above, the psychological concepts advanced in this book have already been successfully applied to the elucidation of further problems—applications that have resulted in a very marked clarification and extension of our knowledge. Among the most interesting of such applications may be mentioned the following :

Freud's own formulation of the outcome of intra-physical conflicts in neurosis, in psychosis and in the ' normal ' mind in terms of the ego's attitude towards the id, the super-ego, and reality ; [6]

Reik's recent treatment [7] of Freud's astonishing earlier discovery,[8] that in certain cases crime may be committed from excess of conscience in order to gratify the need for punishment ;

The very striking advance made by Ernest Jones as regards the theory of suggestion in general and the relation of auto- to hetero-suggestion in particular ; [9]

Freud's explanation of certain important factors in social cohesion in terms of identification by each member of a group of his own super-ego with the leader of the group.[10]

The interesting treatment by Deutsch of certain factors of the psychology of the pregnant woman in terms of the attitude of the ego and the super-ego to the fœtus.[11]

All these works (and a considerable number of others which we cannot mention here) bear eloquent testimony to the utility of the concepts used and elaborated in this book. Nevertheless it is, we may repeat, very clear that these concepts in their present tentative and somewhat indefinite

[6] *Collected Papers*, Vol. II, pp. 250 and 277.

[7] *Geständniszwang und Strafbedürfnis*, 1925.

[8] *Collected Papers*, Vol. IV, p. 342.

[9] International Journal of Psycho-Analysis, 1923, Vol. IV, p. 293.

[10] *Group Psychology and Analysis of the Ego*, 1922.

[11] *Internationale Zeitschrift für Psychoanalyse*, 1925, Vol. XI, p. 50.

form open up a wide and inviting prospect of further work with a view to the eventual attainment of greater definiteness, accuracy and precision. Indeed it is largely just this invitation to further research, this propounding of fresh problems for solution, that renders the book so fascinating, in spite of its not inconsiderable difficulties. We may therefore perhaps be allowed to conclude this notice with a brief indication of some of the many problems that crowded up in the mind of the present reviewer as he read the book.

(1) In the first place, of course, there is obviously an urgent need for a more complete and systematic study of the economics and dynamics of the super-ego. The present book itself clearly makes no attempt at completeness; in particular the 'primary' narcissistic elements are here rather neglected in comparison with the 'secondary' narcissism resulting from the regression from object-love. Ernest Jones has already made a most useful though admittedly tentative effort in this direction,[12] an effort which undoubtedly clears the ground and prepares it for the more solid and permanent theoretical structure that we may hope to see rising on it before very long.

(2) Closely connected with this is the need for further inquiry as to the relations of the super-ego to the systems Pcs and Ucs. At present it appears that part of the super-ego belongs to the Pcs, while another part belongs to the Ucs.[13] Here, as elsewhere, we expect to find characteristic differences between what is Pcs and what is Ucs, differences of the kind to which Freud drew attention in his paper on 'The Unconscious'.[14] But up to the present there seems to have been no attempt to describe these differences as they affect the super-ego. Indeed, we are still largely ignorant of why a part of the super-ego is Ucs at all. Freud's all too brief references to this question on p. 53 (in connection with the relation of the super-ego to the Œdipus complex) and in a few other places amount only to a suggestion rather than to an explanation.

(3) An interesting economic problem is presented by the relation of the ego to the parent (*a*) as perceived or thought of as a real person, and (*b*) as incorporated in the super-ego. It seems clear that as a rule the ego adopts the same attitude to both forms of parental influence; an ego which submits masochistically to the tyranny of a harsh super-ego will also be submissive to a harsh external authority (father surrogate). The super-ego exists in addition to the external father and not as an alternative;[15] it may serve as a substitute for the father in his absence (as is manifested in

[12] International Journal of Psycho-Analysis, 1926, Vol. VII, p. 303.

[13] Alexander has recently suggested that the term 'ego-ideal' should be used for the Pcs portion, and the term 'super-ego' confined to the Ucs portion (*Psychoanalyse der Gesamtpersönlichkeit*, p. 40).

[14] *Collected Papers*, Vol. IV, p. 98.

[15] The same applies to many identifications with lost love objects. Cp. p. 37.

' postponed obedience '), but does not generally detract from his influence when he is present. The economic position implied by this rule would seem to be worthy of investigation : as are also the possible exceptions to this rule (such as perhaps occurs, for instance, when a hypnotist fails in obtaining obedience to criminal suggestions).[16]

(4) We know that the character and manifestations of object-love may differ according to the nature of this love, e.g. according to the relative influence of anaclitic and narcissistic elements and the relative predominance of the various developmental stages of the libido, oral, anal-sadistic, genital, etc. When the object becomes incorporated in the self, as happens during the formation of the super-ego, to what extent does the nature of the former object-love in turn affect the super-ego ? Any answer to this question should, of course, distinguish the effects of the original nature of the object-love from the changes consequent upon the narcissistic regression involved in the process of incorporation.

(5) Freud suggests (pp. 35–37) that every process of introjection of a lost love-object ' has a great share in determining the form taken on by the ego and . . . contributes materially towards building up what is called its " character " '. How far is this true of that earliest and most influential introjection that results in the super-ego ? This question may be one of great practical importance, for if the super-ego can itself be largely influenced in this way, it would appear that the conduct of the parents and of others who enter into its composition can very extensively determine, or at any rate modify, the most important moral characteristics of the child ; a careful study of the extent to which, and the ways in which, such modifications occur might then conceivably put into our hands a most potent weapon for the amelioration of human character ! Freud himself unfortunately does not touch upon this matter, but in a recent (as yet unpublished) paper [17] Dr. Sylvia Payne indicated that she had detected certain rather definite forms of correspondence between the character of the parents and the nature of the super-ego in their children. On the other hand it may be that the possibilities of this kind of influence are rather severely limited by inherited factors—even, as Freud himself suggests (pp. 49 ff.), by factors inherited from our remote ancestry.

(6) The observations and considerations hitherto brought forward by psycho-analysts suggest that the super-ego is usually liable to excess rather than defect of function, so that both an enlightened therapy and an enlightened morality will usually aim at a reduction rather than a reinforcement of this function. But is this always the case ? May it not be that

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[16] Cp. Ernest Jones, INTERNATIONAL JOURNAL OF PSYCHO-ANALYSIS, 1923, Vol. IV, p. 306.

[17] Read before the British Psychological Society, Medical Section.

psycho-analysts have seen more cases of excessive function of the super-ego, just because this excessive function predisposes to neurosis ? Are there not perhaps other cases in which the super-ego is insufficiently developed, and which are therefore more disposed to crime or other forms of anti-social behaviour than to neurosis (one naturally thinks of cases of so-called ' moral imbecility ' in this connection), so that crime may result not only, as has already been shown, as an indirect effect of excessive function of the super-ego, but also directly as a consequence of insufficient function ? [18] Or is crime due only to a qualitative rather than to a quantitative difference between the super-ego of the criminal and that of the normal man ?

(7) It appears that the unconscious need for punishment may be satisfied in a variety of ways, e.g. by bodily disease, mental disease, family unhappiness, economic loss, or social punishment brought on by crime. What is the relative importance of environmental and psychological factors in this choice, and, in so far as psychological factors are operative, what are the precise mental mechanisms that influence the choice ?

(8) The super-ego was originally framed by the introjection of a lost love-object. But it seems that this process is capable of being reversed and that the super-ego can itself be projected on to an external object, either in sexual life or in the case of the attitude of the member of a group to its leader.[19] This seems to be a most important type of object love which has yet received insufficient examination, both in itself and as regards its relations to the super-ego.[20] What changes, we may ask, necessarily occur in the constituents of the super-ego as a result of this projection ? In particular, what happens to those elements which underlie the severely thwarting and censorious character of the super-ego ? Also how far, if at all, is the super-ego capable of being modified by assimilation of the characteristics of the object on to whom it is projected ? These problems have obviously certain important relationships to those raised under headings (4) and (5).

(9) Finally it may be remarked that the doctrine of the super-ego and its relation to the ego appears capable of throwing much light upon the general psychology of character, of feeling and of instinct. In particular it would seem that McDougall's hypothetical unitary instincts of self-assertion and self-abasement (with their correlative emotions of positive

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[18] If so, these cases may either result primarily from failure of the parents and their substitutes to create a sufficiently high standard for the super-ego, or be due to inherited factors (as contemplated in the previous question).

[19] *Group Psychology and Analysis of the Ego*, pp. 75–80.

[20] It would appear that in these cases there has been brought about a state of harmony between the ego and the super-ego similar to that which, *mutatis mutandis*, occurs in successful suggestion.

and negative self-feeling) here receive an alternative, and in many respects a more enlightening explanation, in terms of the relation between the ego and the super-ego (with mania and melancholia as extreme examples).

These are but a few thoughts that have occurred to an individual reader: they may serve to show, however, how numerous, how diverse and how important are the vistas that are opened up by the ideas elaborated in this remarkable little book. Taken in conjunction with the promising work that has been done in the short time that has elapsed since the first appearance of the book, the mere enumeration of some of the problems to which these ideas give rise seems to justify our initial statement that the book will probably prove epoch-making in the history of psycho-analytic thought.

It only remains to mention that Mrs. Riviere's translation shows all those qualities of thoroughness, accuracy and scholarship which we have learnt to associate with her work in this direction. It is to be regretted, however, that no index is provided, for there can be little doubt that the book will often be used for purposes of reference, and, short as it is, its arrangement is not always such as to make it easy to find at a glance the particular point of which one is in search.

J. C. F.

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Further Contributions to the Theory and Technique of Psycho-Analysis. By Sándor Ferenczi, M.D. Compiled by John Rickman, M.A., M.D. Authorized translation from the German by Jane Isabel Suttie, M.A., M.B., Ch.B. International Psycho-Analytical Library, No. 11. (The Hogarth Press and the Institute of Psycho-Analysis, London, 1926. Pp. 473. Price 28*s*.)

Having successfully published Freud's *Collected Papers*, the International Psycho-Analytical Library has added to its laurels by making Ferenczi's contributions to the theory and technique of psycho-analysis available to the English-speaking public. It is no exaggeration to say that this event has been awaited with an eagerness bordering on impatience. The first volume of Ferenczi's contributions, translated and edited by Dr. Jones in 1916, has always been a standard book of psycho-analytical reference, but it merely whetted an appetite for Ferenczi's work which has been ill satisfied by occasional translations of his papers appearing in the JOURNAL. Here at last we have ample material on which to browse at leisure.

It may be said at once that the quality of Ferenczi's work in no way falls short of the most exacting expectations. For many years now his name has been a byword for clinical sagacity, imaginative insight and hardiness of speculation, and there is scarcely a contribution in the present volume but proves that these remarkable qualities remain unimpaired.

The scope of these papers is extremely wide: there are few aspects of psycho-analytical work on which he has not something illuminating or stimulating to say, a fact which makes the work of review somewhat difficult. Happily Ferenczi has come to his reviewers' assistance by pointing out in his introduction what he considers to be the most vital of his contributions, viz. clinical observations on the psycho-pathology of hysteria, the pathoneuroses, tic, etc., and the formulation of his system of active technique.

Whatever the ultimate verdict on his active therapeutic devices, whether they come to be incorporated wholly or partly into a standardized psycho-analytic technique, I venture to think that his original papers on this subject will, in the long run, be valued more for their clinical illustrative material than for the technical conclusions they embody. In the course of elaborating, and incidentally defending, his new methods, Ferenczi has added enormously to our knowledge of infantile development. So much so that the compiler of this volume has been constrained to include one of the most important of the technical articles, 'The Psycho-Analysis of Sexual Habits' in the section devoted to sexual theory rather than in the section on technique. In the meantime, however, interest is so keenly directed to the subject of active procedure that some attempt at evaluation of these methods is unavoidable. The keenness of this interest is not altogether without significance. It implies, I imagine, that various observers have been impressed with the necessity or advisability either of shortening the process of analysis or of making the process more effective. Both of these are legitimate aspirations, but the first at any rate is liable to be associated with certain subjective reactions, e.g. impatience; any approach to the subject should therefore be preceded by a careful examination for subjective bias. If an analyst is satisfied with the validity and efficacy of his methods, interest in shortening the process is, however natural and laudable, the expression of unconscious apprehension and doubt. If, however, he feels that the ordinary method is inadequate in certain cases, he is free to adopt any procedure which does not run counter to psycho-analytic principles. That a temptation exists to barter analytical integrity for the sake of immediate amelioration is undeniable. We have only to think of those psycho-therapists who take credit to themselves for broadmindedness by doing 'a little bit of analysis', taking care to combine this alleged analysis with an exploitation of transference influence for the sake of immediate effect. We know, too, that Freud, in a passage quoted frequently but rarely given *in extenso*, envisaged the mingling of analytical and non-analytical methods in the handling of large numbers of poor people. The sentence usually left unquoted points out that this *ad hoc* method would have to be distinguished from pure analysis. Anyhow, if it is legitimate to be preoccupied with the shortening of analysis we must

also be prepared to show that it is desirable to do so. The general clinician is always ready, consciously at any rate, to expedite treatment, but he rarely suffers qualms of conscience because the existing method is prolonged, cumbersome or costly.

On the other hand, there can be no doubt that the discussion of active methods has been partly vitiated by partisan enthusiasms. Ferenczi has very rightly protested against the adoption of haphazard or 'wild' activity, whilst many headshakings over the new departure have doubtless been stimulated by over-keen reactions to any procedure savouring of Draconic authority. The result has been that in this country at least observers anxious to gain whatever legitimate advantage was possible have been left in a state of rather puzzled indecision. This has been partly reinforced by the inaccessibility of the original papers, but it is only fair to say that the unsettled state of Ferenczi's own formulations on the subject has contributed a good deal to the feeling of general uncertainty. Even now, when the whole of the literature is available, many readers may feel inclined to await a more precise formulation of indications and contra-indications, together with a more systematic exposition of the actual method of initiating activity. In the first instance Ferenczi was quick to share with his co-workers the results of his experiments: he has been unsparing of his own method when he felt it necessary to make any revision of earlier views, but the inevitable result has been a certain amount of misunderstanding and a tendency to await further investigation.

At the same time it has to be admitted that a number of analysts temporized in the hope of getting some authoritative guidance from Freud himself. After all, Ferenczi's first investigations were the logical outcome of Freud's original declaration that in certain cases of phobia treatment could be advanced only when the patient had been induced to face his anxiety situations. Later on Freud arrived at the general formulation that analysis must be carried out in a state of abstinence, but his qualifications were very precise. The abstinence was to have some immediate relation to the state of the analysis. When the patient had overcome some of his difficulties, a state of frustration had to be continued. No very exact indications were given as to the method of inducing this frustration nor as to the amount of authority which might be exercised in so doing. Encouraged no doubt by this material support, Ferenczi arrived at the stage when he felt justified in insisting on active therapy as a routine part of every analysis (see his 'Developmental Aims'). Since then he has very greatly modified his views and his methods (see 'Contra-indications', etc.), but the only authoritative comment we have had from Freud has been that all efforts to accelerate materially analytic treatment have come to nothing. 'The best way to shorten treatment', he says in *Die Frage der Laienanalyse*, 'is to carry it out correctly'. Making every allowance for

the significance of the adverb ' materially ', this comment is to say the least of it disconcerting.

Now Ferenczi at the outset was quite precise about both the method of inducing frustration and the amount of transference authority to be exercised in inducing it. This was shown by his choice of the terms ' command ' and ' prohibition '. The patient was given certain orders calculated to induce tension and after a time was prohibited from carrying out the same activities in order to force libido back into older channels. That a considerable amount of transference authority was exercised is apparent from a footnote to his paper on sexual habits (1925). Here Ferenczi discards the terms ' commands ' and ' prohibitions ', preferring the terms ' positive and negative suggestions ', with which the patient has to be brought into a state of agreement. He adds, however, ' It is very seldom necessary to make continuation of treatment contingent on acceptance of our suggestions '. There is, by the way, some contradiction here to the views expressed in his ' Contra-indications ' paper (also published in 1925), which latter quite definitely suggests that he is always ready to retreat before refractory response to his suggestion. It may appear rather niggling to make any capital of such discrepancies in the account, but in this case it is vital to have a clear understanding of the ultimate amount of authority to be used. Some years ago the writer maintained that it was unnecessary to make authoritative suggestions, that in most cases the effect could be brought about simply by calling the patient's attention to the significance of performing or omitting to perform certain acts. At the same time, whilst Ferenczi has toned down his method considerably, it is still open to theoretical discussion whether a systematized policy of intervention such as he recommends does not carry with it some disadvantages. At the least before doing so one must be fairly certain that the possibilities of psychic remembering have been exhausted and that masochistic aspects of the transference have been fully ventilated. With regard to his abandonment of the terminal technique, it is possible that Ferenczi has been a little precipitate. His various stages of indicating the end of analysis seem entirely justifiable : the only drawback to his original procedure was its lack of elasticity. It is only fair to add that his system of ' forced phantasy ' has been received with very general favour. It differs, of course, from other active methods in that the patient is not stimulated to action.

Turning now to Ferenczi's contributions to psycho-pathology, we may repeat that one of the most important of these is contained in his essay, ' The Psycho-Analysis of Sexual Habits '. As the result of his clinical experiments Ferenczi has been able to sketch out what he calls the physiological forerunner of the super-ego, one which is concerned mainly with ' sphincter morality '. This subject promises to become of increasing

importance in psycho-analytical discussion. If the researches of Mrs. Klein are to be accepted, we must be prepared to recognize a development of the super-ego at a much earlier date than we have hitherto suspected. Ferenczi's conclusions seem to lend some support to this idea, although in estimating the analytical significance of these pregenital conflicts he emphasizes the factor of regression.

Space forbids more than the merest mention of earlier papers of great importance. His view that under certain conditions a bodily illness or injury can result in a regression to traumatic narcissism, giving rise to disease- or patho-neuroses, is skilfully presented, while the paper on hysterical materialization phenomena contains some of the most illuminating observations on the nature of hysterical conversion, the organic basis of psychic symbolism, etc., that have yet been published. Ferenczi's essay on tic is recognized to be the first comprehensive attempt to deal with this condition on psycho-analytical lines, and although some of his contentions have been called in question, particularly its close relation to catatonia and the absence of object relations implied in the condition, other of his views have remained unassailed.

In concluding this very inadequate survey, one cannot omit some reference to the numerous ' short communications ' which are scattered throughout the volume. Some of these present within the space of a few paragraphs ideas or observations which many of us would be more than pleased to sponsor in full essay form.

Edward Glover.

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An Outline of Abnormal Psychology. By William McDougall, F.R.S., Professor of Psychology in Harvard College. (Methuen & Co., London, 1926. Pp. xvi. + 572. Price 15*s*.)

This book is a continuation of the fertile author's *Outline of Psychology*, a review of which appeared in the JOURNAL, Vol. V, p. 496. We may say at once that its outstanding merit is the full recognition it gives to the importance of psychopathology for psychology in general. ' For I believe that academic psychology, even in Germany and America, cannot long continue to resist the inroads of psychopathology upon its preserves ; cannot long continue to retain its atomistic and mechanical prejudices. I believe that academic psychology must soon reform and transform itself into a science capable of assimilating all forms of new insight into human nature, and of giving them a due place in one consistent body of knowledge and theory ' (p. 481). There must be very few academic psychologists who can vie with Dr. McDougall for his insight into this profound truth. The extent of the ground he covers may be seen from the following list of chapter headings. I. Sketch of the Schools of Abnormal Psychology. II. On the Nature of Functional Disorders in General. III. Fatigue,

Drugs, and Sleep. IV. Hypnosis. V. Theory of Hypnosis and Suggestion. VI. Theories of Suggestion of Janet and Freud. VII. Dreaming. VIII. Freud's Theory of Dreaming. IX. Jung's Theory of Dreaming. X. Day-Dreaming. XI. Conflict, Repression, and the Complex. XII. Dissociation. XIII. Automatisms, Fugues, Somnambulisms, Fits. XIV. Vague Fears and Anxieties. XV. Symbolization and Symbolic Symptoms. XVI. Regression. XVII. Tics and Stereotyped Movements. XVIII. Compulsions and Obsessions. XIX. Perversions of the Sex Impulse. XX. Delusions. XXI. Hallucinations. XXII. Exaltation and Depression. XXIII. Schizophrenia. XXIV. Epileptoid Seizures. XXV. Freud's Therapy. XXVII. Dr. Alfred Adler's Theory of the Neuroses. XXVIII. Psychological Types and Their Relations to the Disorder-Process. XXIX. Psychotherapeutic Methods and Mental Hygiene. XXX. Alternating Personalities. XXXI. Co-existing or Co-conscious Personalities. XXXII. Trance Personalities. XXXIII. Theory of Personality and of its Disintegration. XXXIV. Integration and Disintegration from the Point of View of Consciousness. Appendix—The Definition of the Sexual Instinct.

We are concerned here only with that part of the book dealing with psycho-analysis, but we note with interest that this is by far the greatest part. It is becoming increasingly plain that in a book on clinical psychology there is not very much else to write about except psycho-analysis, and the subject has evidently engaged Dr. McDougall's mind very intensely. Knowing from his previous writings that much criticism of psycho-analysis was to be expected, we turned somewhat wearily to discover whether there had been any change in his attitude or whether he had at last been able to devise some novelty in the way of criticism. We have regretfully to say that in both cases the answer is in the negative. The nearest approach to an original idea, one, however, which has been anticipated in other forms, is when Dr. McDougall indicates his intention of founding a new school of psychology based on a particular attitude towards psycho-analysis. This school, for which the title ' The School of Integral Psychology ' is proposed, is defined in the following passage. ' Others have seen that Freud's teaching contains truths of importance alongside many errors; they therefore have never given general adhesion to his views, but have sought to incorporate such truths in the general body of psychological science, rather than to follow Freud in setting up a new and esoteric doctrine, in defiant detachment from all tradition. They continue to recognise the great value of Janet's pioneering work and of much of his teaching, especially as regards the importance of dissociation; whereas much of the development of the Freudian doctrine seems to have been influenced by the desire, largely subconscious, to set up a system of psychopathology entirely distinct from Janet's ' (p. 23). He gives a list of the most eminent members of this school, including such names as Crichton Miller, Hugh

Wingfield, Millais Culpin and T. W. Mitchell, many of whom would be extremely astonished at the honour thus bestowed on them. As we just hinted, the idea itself is not new. Several attempts have already been made to band together a group of workers with the common interest of denying Freud's discoveries. The history of science, however, shows that negative bonds of this sort constitute a very insubstantial basis for comradeship; just as in the physiological world, fertility proceeds from something more positive.

Although, as we shall presently see, he denies in general and in detail, the validity of all Freud's important conclusions, Dr. McDougall does not regard himself as a hostile critic, saying for instance, 'If some of my criticisms seem severe, I would beg the reader to believe that they are written in no spirit of hostility' (p. viii.), and 'I have striven to play the part of a mediator, by recognizing and expounding what seem to me the contributions of great and enduring value made by the psychoanalytic movement, while criticizing freely those psychoanalytic teachings that seem to be ill founded' (p. x.). His subjective attitude is clearly ambivalent and thus represents a distinct advance on that of the earlier critics. Whereas it used to be said that Freud was a nonentity and his conclusions moonshine, we now hear that Freud is a great genius, but his conclusions must not be accepted. A positive attitude is expressed for Freud's personality, the negative one being confined to his work. It will presently dawn on the critics that if a man is a great genius there may perhaps be something of value in what he produces. In the present book the detailed refutation of Freud's theories is interlarded with adulation for the general greatness of Freud. Dr. McDougall writes: 'Unlike many of my academic colleagues I do not regard the psychoanalytic movement with indifference, still less with hostility. I believe that Professor Freud has done more for the advancement of psychology than any student since Aristotle' (p. viii.).

Although Dr. McDougall has learnt to moderate somewhat the extravagantly intemperate outburst that characterised some of his earlier writings on the subject, he still expresses himself very forcibly and in a vein that is hard to reconcile with scientific dispassionateness. Thus: 'The emotional fervour engendered in Freud's disciples (!) by his glowing and dramatic descriptions of the villainy of "the Unconscious" seems to paralyse their critical faculty' (p. 173); 'the esoteric Freudian band' (p. 176); 'he again displays a riotous and too fertile ingenuity and falls a victim to his unwarranted belief, etc.' (p. 412); 'The theory seems to me a piece of mythology' (p. 276); elsewhere the same theory is 'fantastic, obscure, and very difficult to accept' (p. 179); and 'both theories are fantastic and far-fetched in the extreme' (p. 419).

As psycho-analysis means the investigation of the unconscious, one rightly asks what experience of the unconscious has anyone who writes a

book on the subject. Dr. McDougall admits that he has no personal experience of psycho-analysis, but adds apologetically : ' I have attempted to compensate for this deficiency by reading as carefully and sympathetically as possible a large part of the very extensive Freudian literature ' (p. xi). How much he has profited from his reading will become apparent from the quotations that follow.

Let us begin with the simplest matters of all, those of purely external and easily ascertainable facts. The comically grotesque passage concerning Freud's relation with Janet mentioned above is in accord with a number of others in which Dr. McDougall ascribes Freud's work to Janet's inspiration. We learn that Freud went to the Salpêtrière in the early nineties and there began his study of the neuroses under Janet's influence and guidance (pp. 18 and 234). The easily accessible facts, on the contrary, are that Freud never studied at the Salpêtrière in the 'nineties, that when he was there in the middle 'eighties he heard nothing about Janet's work for the simple reason that it had not yet begun, that he has never met Janet in his life, and that no single idea of his can be traced to Janet. We also learn (p. 131) that *after* returning from his imaginary studies with Janet Freud became associated with Breuer in the study of a well-known case of hysteria, working together at the case and discovering a complex with the help of hypnotism. Every other reader of the literature except Dr. McDougall would know that the case in question was investigated by Breuer alone and that the association between the two men was *before* the visit to Paris.

If Dr. McDougall is so untrustworthy a guide in such simple matters as these he will not arouse confidence when he comes to the presentation of more complex themes. A good deal of his quarrel with Freud appears to have originated in the latter's expression of regret that the theory of instincts is still in such an unsatisfactory state, and Dr. McDougall cannot understand why Freud does not accept the gift that he has made to the world in his particular theory of instincts. The list there propounded of quite unanalysed ' instincts ' must of course prove unsatisfying to an analyst who cannot rest content with mere labels. Through not appreciating the unconsciousness of the super-ego Dr. McDougall is again and again thrown into confusion in his endeavour to understand Freud's teaching on the subject of repression, censorship (throughout the book incorrectly personified as ' The Censor '), and their relation to the ego. ' Under these various names (i.e. ego, ego-instincts, etc.) he refers to and, as it seems to me very confusingly, inadequately, and somewhat inaccurately, describes that nucleus of the character which I have described as the sentiment of self-regard ' (p. 167).

Positive transference proceeds from the instinct of respect, negative transference from that of self-assertiveness, whereas suggestion is a

manifestation of the instinct of submission. What Freud calls the sexual instinct (incidentally Freud uses the word 'Trieb', not 'Instinkt') should be called a sentiment. Freud confounds the entirely different parental instinct and sexual instinct, just as he confounds tenderness with sexuality. Sadism and masochism are not sexual components, but manifestations of the instincts of self-assertion and submission, the astounding statement being made that ' there is, in animal life, nothing corresponding to the human tendencies known as sadism and masochism ' (p. 331).

The Freud-Ferenczi theory of suggestion finds no favour because of its sexual aspects, whereas we have just learnt that suggestion has nothing to do with sexuality. ' If we take the theory seriously, we should expect to find that the normal man is susceptible only to the co-operative or " maternal " form of suggestion ; and the normal woman only to the domineering or " paternal " form ' (p. 133). Freud's extension of this theory in the phylogenetic direction ' leaves untouched the fact that women are at least as suggestible as men, and probably on the whole more so ' (p. 135) ; if this theory were true ' We should expect sexual jealousy, if anywhere, only among the women ' (p. 136), so that the verdict pronounced is ' not proven and wildly improbable '. By getting thoroughly confused between the ordinary use of verbal suggestion in psychotherapy and the use to which transference is put in psycho-analysis (namely, to get the patient to perform a piece of internal psychic work) Dr. McDougall is able to find all sorts of contradictions in the writings of psycho-analysts on this subject. He has even found—though certainly not in their writings—a ' " holy horror " of hypnosis ' which they are supposed to display (p. 466). ' Most of the analysts of the various schools have repudiated the imputation that suggestion plays any part in their therapy ; and some have repudiated it with a fervour of moral indignation that is amusing. For a principal objection raised by many of them to the use of suggestion, and especially of hypnotic suggestion, is a moral one ; namely, that suggestion is an appeal to, or a utilization of, the erotic motive. Yet, as we have seen, " transference ", the essential step of their own procedure, involves, according to Freud's own account, both the erotic attraction of the patient and the exercise of suggestion upon him ' (p. 427), whereas, on the other hand, ' More and more Freud himself has admitted the rôle played by suggestion in psycho-analytic treatment ; and indeed to deny it would be futile ' (p. 467).

The clinical description of transference is, as one might expect, rather entertaining. ' The transference is not always or necessarily manifested in any passionate declaration by the patient. Rather the physician infers it from evidence of a more docile and friendly attitude. Perhaps the patient inquires after his health or that of his family, or displays in some other way a polite interest in his welfare. Then the physician knows that the

transference is going on ' (p. 423). Psycho-analysts who know how their labours begin only after the initial stage of positive transference has been replaced by the lasting opposition of the resistance will be astonished to be told that their daily observations should be quite inverted. It is, so we hear, only at the first introduction that they meet with hostility, and after this is overcome all is plain sailing. We are even provided with an explanation of this delightful state of affairs. ' It is natural enough that a patient, when he enters upon a course of analysis, should be somewhat defiant and self-assertive over against the physician who threatens to probe his innermost secrets and reserves. And it is equally natural that a skilful and experienced physician should be able to reverse this attitude, should be able to obtain the respect and even admiration of the patient, and thus render him amenable to suggestion, docile, and ready to accept the physician's views, interpretations and reasonings ' (p. 425).

Dr. McDougall finds that ' it is impossible to give a consistent account of Freud's theory of dreams, because Freud's own account contains radical inconsistencies, which also render criticism of it extremely difficult ' (p. 172). It is equally difficult to answer the innumerable objections that he brings against the theory without simply repeating expositions readily available elsewhere. He recognizes that there is much truth in the theory, which means simply that *some* of Freud's conclusions are *sometimes* true. Any generalization, however, is vigorously refuted. He gets into the usual difficulty over the censorship (failing to recognize the unconscious aspects of the ego) and cannot accept the essential part of Freud's theory, i.e. that the function of dream formation is to guard against the awakening of the sleeper, in view of the fact that so many dreams do awaken him. This last naïve remark well illustrates the level of the general criticism. He consoles himself with the reflection that Freud is withdrawing most of his generalizations. Thus, Freud no longer maintains that all dreams are sexual, as he was once supposed to do. ' Further, he now recognizes that the large class of fear dreams, as well as those directly expressing bodily needs, fall outside his formula ' (p. 187). This will be news to Freud as well as to all other analysts. Not recognizing the distinction between dread and fear there drawn, he caricatures the present reviewer's discussion of battle-dreams as follows : ' Of course, if we accept his conclusion that all fear is neurotic fear and that all neurotic fear is due to repressed sexual *libido*, it follows that the fear of battle-dreams is of this nature ' (p. 181), and, to score a point, quotes an obvious mistranslation from the German edition of the essay in question although it appeared in English in no fewer than three accessible places. ' We have then, if we accept Jones's reasoning, the following remarkable doctrine : All fear is morbid anxiety ; it is the ego's defensive reaction against the claims of unrecognized sexual hunger ; and fear, the commonest neurotic symptom, is fear of " the

Unconscious ", and is constructed by " the Unconscious " in order to protect the ego against fear ' (p. 316). This passage, like that quoted above on dreams, shows that the author mistakes the failure of a function for the function itself. Because some dreams fail to preserve sleep and some neuroses fail to convert all fear into symptoms, therefore this cannot be the function of the process in question.

Symbolism gives him, of course, the usual trouble. He is evidently under the misapprehension that psycho-analysts confound unconscious symbolism with external reality. Thus, Freud ' suggests that the origin, the *raison d'être*, of all agricultural practices is to be found, not in the nutritive needs of man, but in the sexual impulse ' (p. 177). Quoting a passage from Freud on the archaic nature of the symbolic process, i.e. symbolization, he applies this literally to individual symbols. ' If such symbols are universal in the race and innate in it, they must have been acquired as innate dispositions at a remote period, when all men lived the life of primitive men or savages. Yet how could they then have acquired the umbrella symbol ? Or how, when they dwelt in caves or trees, could " the Unconscious " have adopted a house as the symbol of the human body ? ' (p. 180). The final summing up of the matter is that ' In respect of the ready acceptance by so many readers, both of the doctrine of dream symbolism and the rest of Freud's dream theory, I suggest that we have to do with a common weakness of the human intellect ' (p. 177).

Dr. McDougall cannot find sufficient grounds for accepting Freud's theory of regression, which for him consists in ' the patient becoming dominated by the sexual desires of his infancy '. He has evidently overlooked the theory of regression in connection with dream life and hallucinations. The concept of repression is favourably received, but is throughout applied in a superficial manner, e.g. as being a volitional act.

With regard to the theory of the neuroses Dr. McDougall agrees that there is often some conflict and some repression present, but he rejects the disguised wish theory and naturally also that of their essentially sexual nature. Speaking of paranoia, he would account for its frequent association with homosexuality by the guilt and fear of blackmail accompanying the latter. ' What form of such repressed " guilty conscience " could more readily generate delusions of persecution than one concerning homosexuality ? For the patient well knows how strongly this is reprobated and condemned by society and by law ' (p. 341 and p. 411). Sexual perversions, just as the neuroses, are to be explained on much simpler lines than those laid down in ' many chapters of abstruse and learned speculation on " the Unconscious " and the Œdipus complex ' (p. 330). Chance association of ideas and similar superficial explanations suffice in most cases. The frequency of homosexuality ' is sufficiently explained by the common tendency of men who indulge freely in more or less indis-

criminate sex relations to seek ever new sources and modes of gratification ' (p. 323). ' In this way also we may understand how, in all societies, some men of middle age who have led a life of free indulgence with the opposite sex turn to members of their own sex in order to obtain the stimulus of novelty ' (p. 324). Also ' We have to remember that, in the human species, the bodily differentiation between the two sexes is slight ' (p. 323). Dr. McDougall naturally protests against the view that friendship, etc., represent sublimations of homosexuality. ' Respect for a distinguished man or a strong character, in high or lowly walks of life, may grow up in entire independence of the sexual instinct. The notion that I am sexually attracted to Lincoln or Hamilton or Aristotle or Charles Darwin or Sigmund Freud, is fantastic ; yet it is certain that, if I should find myself in the presence of any one of these men, my attitude would at once be one of profound respect ' (p. 427).

The opposition to the sexual theory follows the conventional lines and has been partly hinted at above. The positive evidence at the disposal of psychologists shows ' that sexual instinct first awakens in the majority of mankind in the eighth or ninth year . . . my own retrospection agrees with this and emphatically denies any earlier stirrings ' (p. 565). Any earlier signs of sexuality than this are therefore to be regarded as indications of abnormal precocity. Freudians assume ' that all children are allowed to overlook and to overhear the intimacies of their parents, and that every child suffers, at least once, sexual outrage at the hands of older persons ' (p. 282), which will be news to us. The component instincts are disposed of equally summarily : ' The annexation of the acquisitive impulse to the sex instinct involves a still more remarkable display of perverted ingenuity. One of the many strange and insubstantial Freudian assumptions is that every child likes to play with his fæces and urine, and that he derives sexual pleasure from retaining his fæces when he should extrude them ; he is supposed to treasure his fæces as a most valued possession ' (p. 164).

The Œdipus complex arouses the wildest protests, of which we will quote only the following gem : ' Freud tells us that the direction of the man's sex-impulse towards woman is determined by the sexual pleasure he experiences in taking milk from his mother's breast. I will not dilate upon the extravagance of this suggestion. I will merely ask, How then does the sex-impulse of woman become directed towards the male ? The only consistent answer open to Freud is to assert that it is through pleasurable experiences of the female infant connected with her father's genital organs—an answer which is more manifestly absurd than the suggested explanation of the male's attraction by the female. One might add that, if this fantastic notion of Freud's were true, we should find among the rising generation a majority of both sexes whose sex-impulse was directed

primarily to feeding-bottles; the feeding-bottle must be fast becoming an almost universal fetich-object' (p. 564).

The patient reader of this review must now be prepared for a shock. To his astonishment he will learn, that in spite of the detailed repudiations indicated above, Dr. McDougall nevertheless regards himself, not merely as an impartial mediator, but fundamentally as an admirer of Freud's work and attitude. He positively states that his own psychology accords remarkably with Freud's. 'It is, I think, true to say that no other two systems of psychology, developed independently, are so nearly alike in respect of fundamentals. . . . That two lines of approach so very different in respect of starting-points and methods should have led to psychologies so closely agreeing in fundamentals is, I think, good reason for regarding their points of agreement as approximations to the truth. Both psychologies are of the hormic type; that is to say, for both of them purposive striving is the fundamental fact and function of human nature' (pp. 157 and 158). It is the wish element in Freud's psychology that so attracts Dr. McDougall, especially when the wish can be conceived of in an elaborate, purposive and teleological form and not as a lowly search to gain pleasure and avoid pain. Freud was for years sunk in the swamp of hedonism, but to Dr. McDougall's relief, he has lately emerged on to the hormic plane by agreeing that there is something more fundamental than the pleasure-pain principle.

This fundamental agreement, however, does not extend far in practice. The passage reaching furthest in this direction is as follows: 'It is here freely admitted that some features of the Freudian theory are approximations to truth, especially the doctrine of the psychogenic nature of the functional disorders, the importance of internal conflict and repression, and of the subconscious working of repressed conations. And, above all, it is admitted that the fundamental notion guiding Freud's therapy is correct, namely, the notion that exploration of the mental nature and origins of the disorder and the revelation of them to the patient is the most essential step in therapy' (p. 414). That even here the agreement is little more than lip service is plain enough from the main tenor of the book.

In conclusion, one cannot refrain from expressing one's wonder that a man who wishes to write a book on a subject where he has had no personal experience should not, to safeguard his reputation, take the obvious precaution of having his manuscript read by an actual worker in the subject. The answer to this riddle is, we suppose, that such a man would not in such circumstances write such a book.

E. J.

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Sex in Man and Animals. By John R. Baker. With a Preface by Julian S. Huxley. (George Routledge & Sons, Ltd., London. Pp. 175. Price 7*s.* 6*d.*)

This is one of the most valuable books on the biology of sex we have ever come across. The author is a highly competent biologist with an exceptional power of presenting technical matter simply and lucidly. All psychologists would profit from his remarkable presentation of the latest knowledge concerning such topics as sexual reproduction, Mendelism, sex hormones, parthenogenesis, etc. It would be a pleasure to quote and discuss passage after passage were the scope of this JOURNAL a different one. Special attention should be directed to the chapter on the ' abnormalities of sex ' in animals, which have a distinct bearing on some human problems.

We could have nothing but praise for this book if only it consisted of its first nine chapters. Unfortunately the author has been impelled to add a tenth chapter dealing with various social, medical, anthropological and psychological problems, where he is clearly out of his depth. This chapter painfully contrasts with the high scientific level maintained in the rest of the book. He attempts to forestall criticism by the following piece of generalization, one which will fall very flat to workers in these other fields : ' The foregoing part of this book, resting as it does on a solid basis of fact, contrasts markedly with this last chapter, the greater part of which is concerned with social anthropology and psychology. In these two sciences, particularly the latter, there is a large amount of hypothesis and relatively little fact '. The difficulty surely is not the smallness of fact, but the ill-digestion of the enormous masses of fact that exist. The author falls into the usual errors of being naïve in the face of complexity, dogmatic in the face of problems as yet unsolved, and badly informed where exact knowledge exists.

The word ' psycho-analysis ' occurs once in the text, and the author has evidently attempted to digest something of the subject. We note, however, that the ' list of books dealing with sex problems ' at the end, though it contains items by Bousfield, Hadfield, Rivers and Marie Stopes, does not mention a single book by Freud or any other psycho-analyst.

We read that ' the instinct of fear may be sublimated by keeping the mind always ready to meet difficulties should they arise ', which betrays no more knowledge about psycho-analysis than is needed to misapprehend a technical term.

The Œdipus complex is defined as ' *unnatural* affection between mother and son '. On the other hand a homosexual stage of development is recognized as being normal ' at the age of ten or thereabouts '.

The author betrays a decidedly homosexual attitude towards the difficult problem of the psychological differences between the sexes. ' It is

quite probable that the only inherent mental differences between men and women are *the instincts directly concerned with sexual intercourse* and the care of children.' For all we know to the contrary, this might perhaps be true if by this phrase is meant all the mental derivatives of the sexual instincts. It is clear, however, from the words here underlined and from the general context that the author is referring to coitus alone. Sexual desire is in several passages implicitly connected with masculinity; for instance, in speaking of the popular belief that the parent with the stronger sexual instincts tends to have children of his or her own sex, the author adds, ' Why this has not resulted in the enormous numerical superiority of the male sex, I do not know '. The old bugbear of ' equality ', a concept which is nowhere defined and which appears to mean ' similarity ', comes up again and leads to strange remarks. ' To most men the idea that women are their equals is abhorrent in the extreme '. The author comes to the conclusion that women are not inherently ' inferior ' (whatever that may mean) to men. ' Their inferiority is due to their upbringing, during which inferiority is continually (though unintentionally) suggested to them '.

The author believes that ' the well-known infertility of prostitutes must be ascribed rather to the use of contraceptives than to promiscuous sexual intercourse '. No mention is made of the usual medical view that the infertility is due mainly to venereal disease.

' Primitive peoples render themselves attractive not only by clothes of various sorts, but also by mutilation of the body, particularly of the ears and nose. Circumcision and the piercing of the ears for ear-rings are the last traces of these customs in civilization '. Comment on this naïve remark would be superfluous.

We have said enough to substantiate our view that the author would have been well advised to omit the final chapter, or at least have collaborated in it with someone better informed. This in no way detracts, however, from the exceptional value of the main part of the book, where he is evidently a master of his subject and an artist in presentation.

E. J.

*

The Invert and His Social Adjustment. By ' Anomaly '. With an Introduction by Robert H. Thouless, M.A., Ph.D. (Baillière, Tindall & Cox, London. Pp. 160. Price 5*s*. net.)

This book does not claim any scientific standing, but it should have considerable social value. Its main object is to enlighten and encourage the large class of sexual inverts, with perhaps a side aim of inducing greater tolerance for these unfortunate victims of maldevelopment. There is no trace of sentimentality in the book, nor does the author make the frequently exaggerated claims for the ' urning '.

Keeping himself well within the bounds of conventional morality, the

author deals with the numerous problems of adjustment that confront homosexuals. With patient insight he dispels many erroneous beliefs and gives much excellent advice of a practical form.

The author is very inadequately informed on the scientific subject of cause and cure and has evidently no knowledge of the important contributions that psycho-analysis has made on both these points. With this one exception, however, the book has our cordial good wishes, and we are sure it will succeed in its aims of relieving many readers in this way afflicted and of procuring greater tolerance for their condition from other readers.

E. J.

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Contraception (Birth Control), its Theory, History and Practice. A Manual for the Medical and Legal Professions. By Marie C. Stopes. New and Enlarged Edition. (John Bale, Sons & Danielsson, London, 1927. Pp. xxvi + 480. Price 15*s.* net.)

The first edition of this book was reviewed at length in the JOURNAL (Vol. V, p. 240), and we have nothing essential to add to what was said there. The only alteration of any import in the present edition appears to be the recommendation of chinosol in place of quinine in soluble pessaries.

The book occupies a unique position in being the only compendium of the data available in regard to this important but neglected topic. The author rightly comments on the extensive ignorance of medical practitioners and the difficulty they experience in finding authoritative teachings on this as on so many other sexual topics.

The author has done such valuable work of a propagandist kind that it seems unfortunate that she should mar her work by her precipitate and unscientific temper of mind. She rightly says that investigations and experiences connected with the present subject will probably furnish us with much new information concerning the physiology of sexuality, but we are not encouraged to expect that her own work is to be relied on in this sense. One example of her methods will illustrate our point. In the review previously published in this JOURNAL Dr. Rickman gave the reasons why exceptionally clear evidence was needed before the statement about the ' interlocking of the os and penis ' can be accepted. The author meets such criticism with the reply : ' My remarks were not a " belief " but were based on facts, and were a statement of conclusions from observations. I may now mention that at the clinic, among 5,000 persons examined we found thirty-nine such cases, and I have also records of several more from correspondents ' (p. 210). ' That this ever takes place is, I am aware, contradicted by some medical practitioners. Nevertheless it is a positive fact that it *does* take place ' (p. 60). The dogmatism of such statements is in no way rendered more scientific by expressing them in terms of statistics and percentages when the very point at issue is the proof of the

possibility of the phenomenon ever occurring. The author plainly attaches high importance to her ' discovery ', for she says in respect of it that ' it is evident that a new addition to anatomy and physiology has been one of the harvests of our pioneer Clinic ' (p. viii), and that this supposed ' interlocking ' ' alone makes an *absolutely* complete and perfect union ' (p. 72).

E. J.

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Reality. A New Correlation of Science and Religion. By Burnett Hillman Streeter. (Macmillan & Co., Ltd. Pp.350. Price 8*s.* 6*d.*)

The feeling of reality or unreality attaching to ideas is largely conative. Originally what is pleasant is accepted ; what is painful is ignored. Later by a complicated process, which Freud and Ferenzi are beginning to explain, the possibility of painful experience recurring and of pleasant experience failing to recur is recognised ; but induction is never wholly freed from the influence of predilection. The real romances of our lives are in the past, not in the future ; we shall not love again as we did in infancy, nor be loved as we then imagined that we were. That these relationships are over, never to return, that we were disillusioned in proportion to the intensity of our demands, and that our own wilfulness contributed not a little to their imperfection, are facts which are hard to face. The memory of these romances is obliterated and they are regarded as unreal, but since they are too important to be given up something as perfect but more enduring is expected in the future. The belief that somewhere and sometime either in this world or the next we shall experience the perfect love is a fantasy that none escape. The romances of youth, the belief in the soul or in God and the delusions of insanity are refusals to renounce the past. They differ in the strength of this refusal and in the fixation which they project. Religion would seem to be the classical example of such delusion, for whether it is naïve anthropomorphic superstition or subtle metaphysic it is dictated by the same will to falsehood, the refusal to accept unpleasant truth. At a time when life is replete with substitutes for its losses this attitude is not difficult to overcome, but to discard it permanently demands an arrogance greater than the dread of loneliness.

Canon Streeter's book is an example of ingenuity of argument in the service of the will to prove the world other than it is. Although he was once for a short time agnostic, it is clear that his will to believe is the dominant passion of his life. That God exists ; that He is good ; and that something resurrects from suffering nobly born, are axioms for his theory of reality. Anything in science or philosophy which can be made to seem compatible with these preconceptions he accepts, but that which too obviously conflicts is utterly rejected.

He thinks that the world of science and of theism do not exist in them

selves, but are representations of a metaphysical reality. He is concerned to show that science cannot give a complete account of all that is, but that it must be supplemented by religion. Science, he thinks, is the diagram, religion the picture of reality. The picture is coloured ; that is, it represents values, which the diagram does not.

Canon Streeter is right to regard science and religion as representations, but I do not think they represent anything more ultimate than the combinations of experience we believe possible, nor do I think that science is necessarily incomplete. It is true that physics does not at the moment represent values or emotions, but when the correlation between psychology and physics is worked out, the physical brain may be regarded less as the diagram of the sense brain than as the diagram of that consciousness which could experience it only in a mirror ; and this consciousness would then be represented in its entirety as including emotions as well as sense. The diagram would be complete and would not require the supplement of a picture.

But I would concede to Canon Streeter that the picture might still have its uses. When the whole history of a process is known there is no reason why it should not be represented more shortly, if less exactly, as that which tends towards the state of equilibrium to which it does attain. If, for example, it can be shown that the mechanism of the world is such that it will reach a saturation point of love, there is no reason why it should not be described as dominated by a creative love urge. This description would not supplement the scientific formula, it would summarize it epigrammatically.

Canon Streeter thinks that the world is dominated by such an urge. Freud has found it convenient to accept a similar principle, but his Eros divides the honours with his Todestrieb, nor has it the moral qualities of Canon Streeter's more personal conception.

For Canon Streeter the love urge is a striving after good, and, as for him a good action must be free and a free action undetermined, he elaborates arguments to show that the world is not determined. He thinks that determinism is incompatible with the belief in freedom which we all possess. But the belief in freedom is the belief that action follows the will to action, and there is no reason why the will should not, as it does, determine the future and be at the same time itself determined by the past. He argues further that if the determinists are right their arguments must be determined by their character and past environment and independent of induction. But, surely, acquaintance with the premises forms part of this environment and combines with prejudice to determine the conclusions. If conclusion and acquaintance with the premises were independent occurrences, thought would be chaotic, not determined, and even if it were chaotic, that is undetermined, the Creator would not be freed from the responsibility

for evil, but the creature from the sense of sin. The Creator is responsible as much for singularities as for uniformity, but the sense of human responsibility demands a regular connection between the present and the past.

There is much in this book which I have not space to mention, but the appendices on ' Visions and Dreams ' and ' Instinct and Morality ' will be of interest to psycho-analysts. In the former it is contended that the Freudian conception of dreams as wish-fulfilments is too narrow, and several dreams are quoted which represent pictorially current conscious thoughts of an abstract nature. No effort has been made to detect repressed wishes conveyed by the same material.

In the appendix on ' Instinct and Morality ' an argument against Hedonism is developed, in which it is stated that were actions the resultant of conflicting tendencies, the more egotistical, being older, would always win. But this is exactly what group selection would avoid.

Canon Streeter is an erudite and often able thinker, but the non-philosophical portions of his book are much the best. At ' the level of enlightened common sense ' his psychology is sound. His criticism of Nietzsche is well founded, and his chapter on the Christ more moving than centuries of orthodox instruction. His taste is always good, and he displays a charity in disagreement that might well be imitated. He does not express contempt for views he does not hold.

R. Money-Kyrle.

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Psychology of the Methodist Revival. By Sydney G. Dymond, M.A. (Oxford University Press, 1926. Pp. 296. Price 10*s.* 6*d.*)

This interesting book is illuminating and throws new light on the history of the Methodist Revival by reason of its skilful blend of psychological interpretation and historical fact. In his introductory criticism of psycho-analytic technique (pp. 6–8), Mr. Dymond quite fails to appreciate the difference between conscious and unconscious mental processes. He also fails to realize that analysis and synthesis are synonymous in the therapeutic technique. The statement that the analyst employs ' conscious catharsis ' for his cure and *induces* the patient to consciously readjust his energies in the right direction suggests that he fails to realize the importance of sublimation as an unconscious factor. On p. 266 we find this poignant statement : ' To what extent the practice of analytical psychology, purely as a therapeutic method, is likely to issue in a religious attitude, will depend entirely on the mind of the practitioner '. We accept these remarks as applied to analytical psychology ; unfortunately, however, the author confuses analytical psychology with psycho-analysis. After this general introduction, and a sketch of the historical background, Mr. Dymond gives us what he calls a Behaviouristic study of John Wesley's mind. This simply means that certain descriptive points employed by Watson have

been adopted. In the chapter on Wesley's religious sentiment the author is inclined to overlook the importance of regression in his character analysis. The sense of forgiveness and peace of mind found in conversion is compared to the replacement of the child's fear by love and gratitude for the parental protecting care. In a later sentence, however, we find that this parental factor is unanalysable in conversion. From Wesley himself, Mr. Dymond turns to the movement in which Wesley expressed his life, a chapter chiefly historical, but one of the pleasing features of Mr. Dymond's work is the facility which he displays in writing history. He has a lightness of touch which makes it most interesting reading.

Robert M. Riggall.

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Origins of Education among Primitive People. W. D. Hambly, B.Sc. With a Preface by Dr. Charles Hose. (Macmillan & Co. Pp. 423. Price 25*s.* net.)

This is a most useful book to keep at hand for reference, since it gives in convenient form not only the results of research by the author himself in different parts of the world, but also material gleaned from the works of all other representative anthropologists. During psycho-analytical work one often wishes to obtain accurate or detailed information concerning some primitive custom, tradition or early legend in order to compare it with a patient's phantasies, dreams or symptoms. It is an easy matter to look up the particular circumstance in this book, which has been prepared to meet just such an emergency, especially when the subject-matter refers in any way to beliefs relevant to pregnancy, child-birth, early infancy or initiation and puberty rites.

The book has been divided into the following sections :

Author's Introduction, which contains a survey of the matter to be treated subsequently at greater length, and an acknowledgement of the inspiration which the author has derived from the Freudian hypothesis relating to the ' subconscious mind ' (*sic*) and its neuroses.

Chapter I—Child Welfare and the Decline of Primitive Races—deals with early infancy and the relations of mother and child, descriptions of Couvade ceremonies, precautions for snaring evil spirits which may attempt to enter the lying-in hut, magic connected with the choice of names, and taboos of secrecy which must be observed to do with naming the child. In this section we find an interesting custom from south-east New Guinea. There the mother encourages the growth and powers of speech of her infant by holding it up in presentation to the first full moon after its birth, while the maternal grandmother cries, ' This is your moon ! ' One wonders whether there is any remote connection between this custom and the common saying that a child cries for or wants the moon. We also read that the

same ceremony is performed in Ba Thonga, where they say of a stupid child, ' You were never shown to the moon '.

Chapter II—The General Education of Boys in Preparation for Triba Life—in which an excellent and full account of initiation rites in all parts of the world are given, but among them there does not seem to be included any particularly uncommon ceremonies, beyond those familiar from Reik, ' *Über die Pubertätsriten der Wilden* ' and other sources.

Chapter III. The Training of Boys for Specialized Functions in Tribal Life. This chapter deals fully with the specialized initiation and training of the medicine man, describing the choice of the neurotic and possibly epileptic person for this important function. Hambly remarks that the primitive medicine man shows evidence of being well acquainted with the power of suggestion and auto-suggestion, as well as being able to make more extensive use of psychotherapy than the greater number of his white and civilized colleagues. He also brings forward evidence from his stores of information of the maladies of these savage races that the primitive peoples are as much if not more afflicted with neuroses, particularly fear neuroses, than those who have already undergone development during progressive stages of culture. It is quite unusual to find this view in a work upon anthropology, and indeed an uncommon opinion to meet anywhere apart from the discoveries of psycho-analysis, since it is popularly believed that neurosis is the heritage of over-civilization and that savages know neither repressions nor the attempt to find a compromise for them in psycho-neurosis. A further study of the taboos and prohibitions which surround the primitive races from the cradle to the grave, however, proves that prohibitions and repressions are at work for the destruction of the peace of the savage mind perhaps even to a greater extent than in the modern world. Whereas to-day only a certain percentage of mankind suffers apparently from anxiety or obsessional neuroses, the primitive seem to have been universally afflicted with these troubles.

Chapter IV. Preparation for General and Special Functions of Tribal Life. This chapter treats with the subject of puberty rites among girls in greater detail than is generally found in accounts of initiation ceremonies, and the author admits that information upon matters concerning women, particularly those derived from facts gathered from male members of the tribe, are not always reliable. They either do not, or pretend for various reasons that they do not, know much about them, and it is more than likely that this is true, because the women are quite as capable of guarding their secrets from the men as the men from the women. The women are most unwilling to impart any information to male anthropologists, and as yet there have been but few women engaged upon research of this sort. Some, however, are quoted in this chapter who have been able to fill in interesting

gaps in the hitherto scanty knowledge we have possessed of the woman's rites. It seems generally thought that they are not so important or so many as those in use among boys, but this may be through lack of information concerning them rather than actual absence of the rites.

One extremely interesting custom to be found among the Nandi is related, which may be given in full, because it seems uncommon and has a significant symbolic value. ' When Nandi girls have arrived at marriageable age their fathers arrange a circumcision festival at which the operation of excising the clitoris is performed. Three days before the event girls have a strong purgative and shave their heads, while at the same time they receive ornaments from friends. The girls dress in *men's garments* and after the operation, provided courage is shown, the young females are allowed to wear presents given to them by warriors, who stand a quarter of a mile away during the ceremony, which is concluded by a dance '.

In the same neighbourhood men about to undergo circumcision assume women's garments.

Tattooing is here shown to be primarily a female custom, practised among the Egyptians as early as B.C. 2000 as part of initiation rites, since when it has been adopted by males in many parts of the world, although it has not yet died out among women.

Chapter V. The Moral Training of Children by Indirect Methods, Abstract Principles and Puberty Rites. Here we find chiefly a review of material already given from a different aspect; at the end, however, under the heading Eschatology, we note some interesting beliefs concerning the after life and heaven. In a Ba Thonga *Tale of Heaven*, we find a reward in heaven to consist of the little girl's most wished-for possession, a baby of her own. ' A girl who feared her mother's anger because of a broken pitcher climbed to heaven, where she found hospitality and a child of her own because she had been good and obedient. The sister of this girl tried to gain access to heaven in the same way, but during life she had been so wicked that on her approach heaven exploded and the girl's bones were blown to her parent's house ' (South Africa). The tale is curiously similar to a phantasy of a neurotic child, who when her mother was angry would take refuge in the linen-cupboard, climbing up to the top shelf, or became so preoccupied that her mother called ' it being up in the clouds '. Here in her wanderings she found a baby and adopted it, because no one seemed to want it.

Chapter VI. Summary and Conclusion. (Mainly statistical.)

Bibliography. Our thanks are due to this author for his admirable compilation of so much valuable information and for the extreme care with which the illustrations have been collected from all sources. One in particular will interest all those who have read Roheim's account of medicine men sucking magic from their patients, for an excellent photo-

graph is given of this curious ceremony (p. 228). No mention of Roheim's Australian Totemism is made, which is surprising since the author has spread his net wide to gather supplementary enlightenment upon the ways and life of primitive men.

M. Chadwick.

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The Mothers. Vol. I. A Study of the Origins of Sentiments and Institutions. By Robert Briffault. (George Allen & Unwin, 1927. Pp. xix + 781. Price 25*s.* net.)

This is the first of three massive volumes that are to appear under this title. In the preface the author presumes that his conclusions will be of revolutionary importance, but adds that they will be arrived at not through argument, and by the direct inference from facts. The facts are certainly there, for the first volume resembles *The Golden Bough* in its immense collection of detailed information. So far the chapters deal with such topics as the Evolution of Motherhood, the Origin of Love, the Primitive Group, the Matriarchal Phase in Civilized Societies, the Institution of Marriage, Group Marriage and Sexual Communism. We shall reserve a further treatment of the book for the time when the later volumes have appeared, which will embody the author's conclusions.

E. J.

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Post-encephalitic Respiratory Disorders. By Smith Ely Jelliffe, M.D., Ph.D., of New York. (Nervous and Mental Disease Publishing Company, 1927. Pp. 135. Price $2.50.)

Although remarkably little is known about the ætiological factors of encephalitis lethargica, extensive studies of the later manifestations (sequelæ) of this disease have led to great advances in the understanding of certain cerebral mechanisms, especially in the corpus striatum and mesencephalon. The literature of the disease has become enormous, and a large number of writers have paid special attention to the frequent and peculiar disorders of respiration occurring in patients who have suffered and still suffer from this malady: Various kinds of dyspnœa, bradypnœa, tachypnœa (often accompanied by sialorrhœa or spitting), irregular breathing, respiratory tics, spasmodic cough, hiccough, yawning, sighing, sniffing, blowing, puffing, and many others.

Dr. Jelliffe gives an historical summary of published clinical reports and of the various hypotheses that have been advanced to explain such symptoms: hypotheses of their peripheral muscular origin, bulbar and thalamic localizations, higher psychomotor tract involvements and emotional origins, and now he contributes some psycho-analytical studies of these respiratory disorders.

There is plenty of evidence that certain portions of the brain are

damaged or even destroyed, and Jelliffe, adopting Hughlings Jackson's principle that the patient is trying to do the best he can with the undamaged remainder, seeks to discover psycho-analytically what these patients are trying to do, what purpose these extraordinary symptoms serve.

He relates the histories of two patients as ' paradigmata ' and gives extracts from his analyses of them (mostly dream interpretations). By the way, Jelliffe gets his patients to write down their dreams, and there is an interesting reproduction of one of these documents which shows tremor while describing an anxious moment.

It is pointed out that these respiratory phenomena go through a kind of cycle. The tachypnœas and respiratory tics of various kinds begin, mount, continue for varying periods and finally end in an apnœic phase with trance states, yawnings, cyanosis or other form of climax. In short, some type of tension is discharged, and psycho-analysis has proved that what happens is an accumulation of libido with ultimate discharge at the oral-respiratory level. It is, of course, impossible here to epitomize the analyses which, even in the original, are of necessity but a summary. The Œdipus complex naturally plays an important rôle. The patients were considerably improved by the psycho-analysis.

This is an important piece of original psycho-analytical work ; but we venture to suggest that Dr. Jelliffe would have been more correct if he had cited a different principle of Dr. Hughlings Jackson, viz., that the first functions to be affected by disease are the latest acquired, the most voluntary, the least instinctive, and that the last to go are the most organized, the least voluntary and the most instinctive. Brought up to date, this means that the first functions to be affected are the ego-instincts, the repressing forces, and the latest acquired libidinal instincts (phallic, anal, etc.), thus leaving the field clear for the expression of the earlier oral-respiratory libidinal instinct. However that may be, we congratulate Dr. Jelliffe on his book, which, by the way, is better got up and bound than its predecessors in the ' Nervous and Mental Disease Monograph Series '. Incidentally this work makes us wonder how long it will be before physicians in this country will realize that the science of psycho-analysis is an important addition to existing methods of investigation and treatment of neurotic manifestations, even those of organic origin.

W. H. B. Stoddart.

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A Manual of Normal Physical Signs. By Wyndham B. Blanton. (The C. V. Mosby Company, St. Louis, 1926. Pp. 215. Price $2.50.)

An excellent and comprehensive summary of physical examination.

E. J.

*

Humanizing Education. By Samuel D. Schmalhausen. (The New Education Publishing Company, New York, 1926. Pp. 343.)

The author of this book undoubtedly possesses a great interest in education and genuine zeal for attempts to revolutionize the educational ideals and systems in vogue to-day. Few people will be found, and certainly none among psycho analysts, to disagree with such an aim, but unfortunately the author gives little indication of the means of attaining it. His problems are important in themselves and many of them are just those which most need comprehension and insight for their solution: infantilism and automatism in education; sex and civilization; psycho-analysis in education; the tyranny of words. But we are offered as solutions little else than floods of 'oratory' accompanied by sweeping statements, all couched in a peculiar form of blended high-flown and intimate personal style. The following quotation, dealing with the question of authority and headship, will illustrate this: 'Pity the principal: he cannot honestly tell you why he has been promoted to glory and ineptitude. We principals all suffer from mental ankylosis. . . . It may sound blasphemous to the orthodox, but it is the plainest truth that a majority of principals have no philosophy of education at all. . . . None whatever. The most astounding dullard—so far as an educational insight into the vexing problems of our social life is concerned—may come out with flying colours as a principal-elect. Another willing routineer has been added to the long procession of machine-men dedicated to the inspiring mission of turning-out (excellent phrase!) certified parrots, monkeys, dogs, oxen, asses—but never, oh, never, vivacious, original, critical, and courageous human beings' (pp. 40 and 41).

Such a statement, which recurs in different forms throughout the book, seems strangely inconsistent with the whole-hearted admiration for a faith in various famous American educators (who have filled the rôle of principal of school or college) on the one hand, and in democracy on the other. One cannot but wonder why, if the products of American education are inevitably destined to develop into parrots, asses, monkeys and so forth, the author should show such touching faith in the power of these same products—the democracy—to reform education and establish true values; he overestimates the future in proportion as he undervalues the past, and a strange undervaluation is surely presented when he writes, for instance 'The older education was not greatly concerned with the mind or with the soul of the scholar. The meaning of education did not reside in happiness or wisdom, but in knowledge' (p. 70). Such a sweeping indictment is difficult to maintain in face of Port Royal, the Jesuits, the wandering teachers of St. Francis, or our own English educators, Dean Colet and Sir Thomas More—to name a few at random.

Throughout the book there is much appreciative reference to psycho-

analysis, and the demand that the educator's attitude shall cease to be that of the moralist and become that of the psycho-analyst. Yet in the chapter ' Psycho-Analysis : a Rational Criticism ' (pp. 126–133), a great deal of misunderstanding of a fundamental kind is shown. It is true that the author admits in his first sentence, ' I am puzzled by these probing psycho-analysts ' (p. 126) ; an honest confession, but one that rather invalidates his ardent enthusiasm for psycho-analysis in other places ! His puzzlement leads him into many strange statements and reproaches, as, for example, when he complains, ' They (i.e. psycho-analysts) can tell a man infinitely more about his waking and dreaming existences than he himself can honestly vouch for, but they cannot direct, or rather re-direct, his conduct ' (p. 126). He might equally well accuse the surgeon of being able to perform an operation for appendicitis, but being unable (or neglecting) to arrange whom the patient shall or shall not marry after he has recovered from the operation ! To direct the patient's conduct for him is not a part of the psycho-analyst's work, and since Mr. Schmalhausen refers so much to psycho-analysis it seems strange that he has not grasped its more important aspects.

Another charge he brings is that the psycho-analytic view ' assumes that traits of character are something fixed, obvious, and recognizable ' (p. 127), and ' social environment is neglected and subordinated as incidental and unalterable for the individual ' (p. 128). Needless to say, both these statements are wholly inaccurate, nor could they have been made by anyone who had given even small study to Freud's work. In another place (p. 129) the author plaintively inquires : ' Why do the psycho-analysts evade the economic issue ? ' and concludes a long list of economic evils (too long hours, unemployment, poverty, etc., etc.) with this naïve remark : ' Improve the social situation and sexual desire will soon enough discover for its gratification normal decent outlets '. Yet again and again elsewhere in his book he deplores the evasion of vital problems, and the refusal to search deeply into complexities of the human mind. The author, though convincing one that he is a warm-hearted man, deeply concerned with humanity's burdens, not lacking in courage or sincerity, has by no means solved personally the problem which he posits on the front page of his book : ' The problem of the new education is briefly this : How to make unscientific minds scientific, and scientific minds philosophic '.

Barbara Low.

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Why Do They Like It ? By E. L. Black. With a Foreword by Dorothy M. Richardson. (Shakespeare & Co., Paris, February, 1927. Pp. 199. Price 6*s*.)

The foreword by Miss Dorothy Richardson, the well-known novelist, and the brief ' Note ' signed ' Bryher ' ushering in this record of school life

claim rather too much novelty for it. The ' Note ' says : ' *Why Do They Like It?* is the first book to be written about it (the public school system) by a boy, from a boy's point of view and with a boy's use of language '. The fact is that this volume is one in a series of such attempts, a series which was ushered in with some sensationalism by Alec Waugh, who dealt with his public school and his experiences therein at the age of seventeen. Such records have their value, not so much from the point of view that they are new revelations of facts (there is little in this volume that any adult with some small knowledge and experience of public schools up and down this country does not already know), but from the added insight they may afford of the adolescent's own psychology, and for the possible quality, one which Miss Richardson ranks high in this instance, of literary value. In her ' Foreword ' she says : ' Among the . . . several impressions left, after a year's interval, from my reading of E. L. Black's story of his school life, by far the strongest is that of the quality of his book as a piece of writing '.

But for those whose predominant interest is not the literary one, the boy's own reactions to the public school life and the genuine emotions which it creates and develops in him, the lines along which he travels in absorbing his varied experiences, and the mirror his mind holds up (allowing that in many aspects it is a distorting mirror) to the objects which surround him—the masters and other boys with their ideals and conventions, the ' system ' itself—these records are the ones of value.

In the face of the testimony of the ' Foreword ' and the ' Note ' there is no room for doubt as to the sincerity and genuineness of this document, therefore the impression of the fifteen and a half years old author of *Why Do They Like It?* as a deeply-inhibited narcissistic type is all the more confirmed. The record throughout is that of a highly intelligent introspective type (at the same time, fond of athletic sports such as riding, boxing, swimming, and in no sense a weakling or ' degenerate ', as the ' Note ' emphasizes) whose inhibitions prevent to an extreme degree his phantasy-life, producing in his literary style and line of thought an efficiency, clarity and terseness which might easily be the work of an adult. All the evidence points to an over-powerful attachment to his mother, accompanied, as might be expected, by a strongly-felt guilt-complex, and by an equally strong homosexuality. As result it is clear, as Miss Richardson has actually pointed out in her ' Foreword ', we get ' a version of that life (i.e. public school life) by one who should never have been sent to a public school. His self-confessed hatred of games, his inability to join a crowd, make, at the outset, for certain misery '. Psycho-analysis gives hope of the solution, at least to some degree, of the problem as far as it is evolved out of the young author's own maladaptations. But it remains that there is much to horrify in the facts revealed : the utter inadequacy of the

mental environment, the lack of elasticity, the encouragement provided for strengthening inhibitions and for regression into infantilism—predominant characteristics not only of this individual school and its personnel, but of (we fear the evidence is irrefutable) the public school system as a whole.

Barbara Low.

BULLETIN OF THE INTERNATIONAL PSYCHO-ANALYTICAL ASSOCIATION

EDITED BY THE

GENERAL SECRETARY, DR. M. EITINGON

THE AMERICAN PSYCHO-ANALYTICAL ASSOCIATION

The third annual winter meeting of the American Psycho-analytical Association was held in New York City, December 26, 1926, with Dr. Adolph Stern presiding. Both afternoon and evening sessions were attended by a large proportion of the members of the association and many guests, bringing the total number at the evening session to over fifty. As the winter meetings are entirely scientific no business session was held. The programme follows :

1. The Problem of Transference : Dr. Trigant Burrow, Baltimore, Md.
2. Psycho-analysis of Personal Relationships : Dr. E. J. Kempf, New York City.
3. Executive Session : Discussion, The Education of Psycho-Analysts. Opened by Dr. William A. White, Washington, D.C.

Evening Session

1. Individualistic Deviations in Psycho-analysis : Dr. Gregory Stragnell, New York.
2. Current Problems in Psycho-analysis : Dr. S. Ferenczi, Budapest.
3. Analysis of the Single Symptom : Dr. Ralph Reed, Cincinnati, Ohio.

C. P. Oberndorf,
Secretary.

The Fifteenth Annual Meeting of the American Psycho-Analytical Association was held at Cincinnati, Ohio, on May 31, 1927, with Dr. Adolph Stern presiding. The following members were present : Drs. Burrow of Baltimore, Glueck of New York, Hutchings of Utica, N.Y., Johnson of Washington, Menniger of Topeka, Oberndorf of New York, Reed of Cincinnati, Smeltz of Pittsburg, Stern of New York, Sullivan of Baltimore, White of Washington and Young of Omaha.

At the afternoon session held in conjunction with the American Psychiatric Association, the following papers were presented : ' Behavioristic *versus* Psycho-Analytical Concepts,' Dr. Ralph Reed, Cincinnati ; ' Constitutional Tendencies of the Ego,' Dr. Bernard Glueck, New York.

At the evening session the programme was : ' Autonomy of the " I " from the Standpoint of Group Analysis,' Dr. Trigant Burrow ; ' Submucous Resection as a Castration Symbol,' Dr. C. P. Oberndorf, New York.

The Society adopted a report made by the Committee on Education, consisting of Drs. E. J. Kempf, S. E. Jelliffe and C. P. Oberndorf, advocating (1) the increase in active membership from fifty to seventy-five; (2) the creation of an associate membership to include persons engaged in fields allied to psycho-analysis but who are not engaged in the practice of therapeutic psycho-analysis.

The following were elected to membership: Drs. Clara Thompson of Baltimore, John Cassity of Washington, Ernest E. Hadley of Washington, Lionel Blitzen of Chicago.

Dr. Oberndorf was elected to represent the Society at the International Psycho-Analytical Association meeting at Innsbruck in September, 1927.

The following officers were elected:

President: Dr. W. A. White of Washington.

Secretary: Dr. C. P. Oberndorf of New York.

Council: Drs. H. S. Sullivan, Baltimore; Ralph Reed, Cincinnati; A. Stern, New York.

C. P. Oberndorf,
Secretary.

BRITISH PSYCHO-ANALYTICAL SOCIETY

First Quarter, 1927

January 19, 1927. Dr. W. Inman: Eye diseases and emotional states. The paper dealt with observations in an ophthalmic practice with a view to elucidating the relationship of emotional stress to organic lesions of the eye. The investigation had been originated by a case published in 1921 where severe uveo-parotitic paralysis with partial blindness was cured by the administration of thyroid after the possibility of a septic origin had been excluded. As described, the disease appeared to have been connected directly or indirectly with a severe bereavement five years earlier.

Cases were related showing the incidence of cyclitis, ocular hemorrhage, glaucoma, etc., occurring on the anniversary of the father's or mother's death, and details were given of the results of an incomplete analysis of a case of keratitis with much vascularisation of the cornea. During the analysis the inflammation was found to vary with the emotional state of the patient.

Attention was drawn to the fact that very rarely in this and other analyses did the patients refer to the dates of preceding mental distress, though there was reason for suspecting the importance of the latter to the patients.

February 2, 1927. Miss Mary Chadwick: Six months' experiment at a Nursery School. This experiment was carried out for several reasons: to ascertain, if possible, (1) whether in the children between two and five years there were yet signs of incipient, present neurosis or neurotic

character-traits ; (2) whether repression was as active among the children of uneducated as educated parents ; (3) if so, what were the inciting causes ; (4) what might be done to improve home conditions or ameliorate the nervous state of the children through the influence of the nursery school.

Results seemed to show that there were as frequent signs of early nervous trouble among these children as in homes where more comfort and understanding exist ; that repression is equally active, if not more early and strongest where some of the impulses are concerned, although more lax than in others ; and that lack of sympathy between the parents and the existence of a double and conflicting ideal on the part of the mother and father are largely responsible for the difficulties of the children.

Suggested methods of dealing with these factors comprise advice to parents and teachers at the school, psycho-analytic treatment of children in some cases, the supplying of outlets for phantasies and impulses in play and other activities, as well as giving opportunity for formation of new imagines tending to the incorporation of ideals which may take the place of the conflicting ideals of the parents.

February 16, 1927. Mrs. Melanie Klein : The importance of words in early analysis. 'I pointed out in my papers and lectures that the child differs in its mode of expression from the adult by the fact that it acts and dramatises its thoughts and phantasies. But that does not mean that the word is not of great importance in so far as the child commands it. I will give an example. A little boy of five with very great repression about his phantasies has already gone through a certain part of analysis. He has brought forward a lot of material mostly through play, but he shows the tendency not to realise this. One morning he asked me to play shop and that I should be the one who sells. Now I used a technical measure which is important for the small child who is often not prepared to tell his associations. I asked him who I should be, a lady or a gentleman, as he would have to speak my name on coming into the shop. He told me I was to be " Mr. Cookey-Caker ", and we found very soon that he meant someone who cooks cakes. I had to sell engines, which represented for him the new penis. He called himself " Mr. Kicker ", which he quickly realised as kicking somebody. I asked him where Mr. Cookey-Caker had gone. He answered : " He has gone away somewhere ". He soon realised that Mr. Cookey-Caker had been killed by his kicking him. " Cooking cakes " represented for him making children in an oral and anal way. He realised after this interpretation his aggression against his father and this phantasy opened the way to others in which the person he was fighting against was always Mr. Cookey-Caker. The word " Cookey-Caker " is the bridge to reality which the child avoids as long as it brings forth its phantasies only by playing. It always means progress when the child has to acknowledge the reality of the objects through its own words.'

Miss N. Searl : A symptomatic act during analysis. A woman patient with a very strong compulsion to ' twist ' the significance of the analyst's words and silences developed the following phantasy, at first credited as a reality : that she had seen a horse with a penis so long that it would have touched the ground had it not been twisted or tied up. Analysis pointed to the possibility that the patient had seen the ' tied up ' or ' twisted ' remains of the umbilical cord on a baby sister, and had later noted its disappearance. This interpretation was confirmed by a dream on the following night. She wished that the father's big penis might similarly be twisted or tied up in order that it might disappear.

March 16, 1927. Mrs. Susan Isaacs : The reaction of a group of children to unusual social freedom. Any study of group psychology amongst children needs to be prefaced by a statement of the relations of the children to the adults who frame the conditions of the group life. The concept of freedom is in this respect psychologically worthless, since any parent figure is of necessity a powerful psychological factor. The natural history point of view has to be corrected by the ecological, and what is needed is an exact statement of the actual relation between the parent figure and the children. If this relation is based as far as possible on reality situations, a very marked social and intellectual development does occur in the children.

Certain general tendencies of group life amongst young children may be noted :

1. A number of quite young children do not at first constitute a group in any psychological sense, since each child is concerned in working out his own imperative phantasies. In so far as these coincide, they provide the grounds for the development of group relations. A striking characteristic of young children's play is the manifestation of unconscious guilt ; this is shown in (*a*) the tyranny of the make-believe parent, in (*b*) the actual severity of judgement of the older children about the younger and weaker ones, and (*c*) the frequency with which they seek real compulsion from the adults present.

2. One condition of friendly feeling amongst a group of young children seems to be, owing to their high ambivalence, the presence of an outsider —an enemy—towards whom hostile feelings can be directed. In many children it is possible to love A. if there is B. to hate.

3. The brotherly feeling between a group of children is most intense when the group is united in hostility to an adult. Freud's picture of the relation of the group of brothers to the primal father is very clearly shown.

The Training Committee, consisting of Dr. Bryan, Mr. Flügel, Dr. Ed. Glover, Dr. Jones, and Dr. Rickman, have met several times to discuss the question of training, but have not yet made an official report.

Douglas Bryan,
Secretary.

GERMAN PSYCHO-ANALYTICAL SOCIETY

First Quarter, 1927.

January 4, 1927. *a.* Dr. Bertram Lewin (New York, guest of the Society) : History of the psychology of conscience.

b. Dr. Sachs : On the discussion of lay-analysis.

January 11, 1927. Evening devoted to discussion of technical questions. Subject for discussion : The attitude of the analyst to his patients' relatives.

Business Meeting. Frau Dr. med. Frieda Fromm-Reichmann (Heidelberg-Neuenheim, Mönchhofstrasse 15) was elected an associate member.

January 29, 1927. *General Meeting.* The reports of the Committee, the Director of the Institute, the Training Committee, the Treasurer and the special Committee entrusted with the management of the Scholarship Fund were adopted. The Committee was unanimously re-elected as follows : President, Dr. Simmel ; Secretary, Dr. Radó ; Treasurer, Frau Dr. Horney. The following were elected to serve on the Training Committee : Drs. Alexander, Eitingon, Horney, C. Müller-Braunschweig, Radó, Sachs and Simmel. The following were elected as managers of the Scholarship Fund : Drs. Böhm, Hárnik, Horney. Dr. Böhm moved that a new rule should be made with regard to the voluntary subscription of members to the Scholarship Fund. He suggested that in future every member should pledge himself in advance to contribute a certain sum every month. The motion was carried.

February 8, 1927. Dr. Radó : Paper on Freud's book : *Hemmung, Symptom und Augst.*

February 15, 1927. *Continuation of the General Meeting.* Dr. Fenichel gave a report of the work done at the Children's Seminar.

A majority of the Society voted for Innsbruck as the place for the next Congress.

Dr. Walter Cohn, Alfred Gross and Harold Schultz-Hencke, associate members, were elected to full membership of the Society.

February 26, 1927. Evening devoted to discussion. Subject for discussion : Lay-analysis. The following members spoke : Drs. Simmel, Horney, Alexander, C. Müller-Braunschweig, Sachs, Eitingon, Radó, Fenichel.

March 8, 1927. Dr. Ischlondski (guest of the Society) : Cerebral mechanisms in psychic phenomena.

March 19, 1927. Frl. Anna Freud (Vienna, guest of the Society) : On the technique of child-analysis.

March 29, 1927. Evening devoted to discussion of technique. Subject for discussion : Actual conflicts. Opener : Dr. Alexander. The following members spoke : Drs. Simmel, Sachs, Radó, Josine Müller, Schultz-Hencke, Böhm, Gross, Fenichel.

The Society arranged for the following lectures for practising analysts and students at the Institute (Berlin, W. 35, Potsdamerstrasse 29) from January to March, 1927 :

1. Sándor Radó : Introduction to psycho-analysis. Part II. (Theoretical and clinical lectures on the neuroses). Number of lectures, six. Attendance, forty-six.

2. Jenö Harník : Sexual investigation and sexual knowledge in childhood and puberty. Number of lectures, six. Attendance, twenty-seven.

3. Franz Alexander : Theory of the individual neuroses. Part I. (Obsessional neuroses and phobias). Number of lectures, five. Attendance, nineteen.

4. Otto Fenichel : Psychology of the ego. Part II. (Structure and genesis of the ego ; the ego and the id ; the ego and the super-ego ; anxiety, ego and symptoms). Number of lectures, eight. Attendance, nineteen.

5. Carl Müller-Braunschweig : Relation of psycho-analysis to religious belief and the cure of souls. Number of lectures, three. Attendance, nineteen.

6. Hanns Sachs : The application of the technique of interpretation to wit and allied subjects. (For practising analysts and students only.) Number of lectures, five. Attendance, twelve.

7. Siegfried Bernfeld : Practical educational questions discussed from the psycho-analytical standpoint. (A series of seminars.) Attendance : (*a*) Beginner's section, twenty-six. (*b*) Section for advanced students, thirty-two.

(8) Sándor Radó : Discussions on technique. (For practising analysts only, and especially for students of the Institute.) Number of hours, sixteen. Attendance, fifteen.

HUNGARIAN PSYCHO-ANALYTICAL SOCIETY

First Quarter, 1927

January 15, 1927. Dr. G. Róheim : Projection.

January 29, 1927. *Business Meeting.* Re-election of the Council. Discussion on the question of lay-analysis.

February 19, 1927. Dr. P. Federn (Vienna) : The commonest narcissistic psychosis.

March 5, 1927. (1) Frau Dr. Lévy (guest of the Society) : Report of a meeting of the Vienna Psycho-Analytical Society.

(2) Dr. M. Bálint : Clinical communications.

a. A young man's theory of pregnancy.

b. Analysis of cases of *singultus*.

March 19, 1927. Dr. L. Révész: Clinical communications:

a. Active intervention in a case of relative impotence.

b. Rapid analysis of a case of insomnia.

In the months of February and March the Training Institute arranged for the following lectures:

Dr. I. Hollós: Interpretation of dreams.

Dr. S. Pfeifer: General theory of the neuroses.

Dr. M. J. Eisler: Theory of the individual neuroses.

April 2, 1927. Dr. M. J. Eisler: Obsessional symptoms and the obsessional neurosis.

April 30, 1927. Frau Dr. Lévy (guest of the Society): Review of Anna Freud's book *Einführung in die Technik der Kinderanalyse*.

May 14, 1927. Dr. M. J. Eisler: The structure of the obsessional neurosis (continued).

May 28, 1927. Frau Dr. Kircz-Tabács: The recent novels of Romain Rolland.

During April and May Frau Alice Bálint gave a course of lectures for lay people, at the Training Institute, on analytical child psychology. The lectures were very well attended.

Imre Hermann,
Secretary.

NEW YORK PSYCHO-ANALYTICAL SOCIETY

First Quarter, 1927

January 25, 1927.

a. Dr. Alexander Lorand: A case of anxiety-hysteria in a female subject who manifested a horse phobia and was of interest in its resemblance to the case of Little Hans.

b. Dr. Abraham Kardiner: A case of anxiety-hysteria which was of special interest because of an unusually well-developed phobia, based on oral-sadistic organization, in which very early cannibalistic phantasies were prominent.

At the business session it was moved and seconded that copies of the resolution drawn up by the Educational Committee be sent to the Zeitschrift and to the International Journal for publication. The resolution which was adopted by the society is as follows:

1. The practice of psycho-analysis for therapeutic purposes shall be restricted to physicians (doctors of medicine), who are graduates of recognized medical schools, have had special training in psychiatry and psycho-analysis, and who conform to the requirements of the Medical Practice Acts to which they are subject. Such practice of psycho-analysis embraces the treatment of individuals suffering from nervous or mental

disease presenting symptoms which interfere with the efficient performance of their normal daily routine.

2. The psycho-analytic instruction of specialists engaged in such fields as anthropology, criminology, theology, law, pedagogy, social service, and physicians in other medical specialities, etc., is approved, provided that such psycho-analytic training be used by such specialists only for more adequate interpretation and the better understanding of problems confronting them in paragraph 1.

3. As prerequisites of acceptance for psycho-analytic instruction, the minimal requirements for non-medical specialists described in paragraph 2 shall be :

a. A B.A. degree from a recognized university or college or its equivalent.

b. Evidence of good character and general ability as follows :

A. Three letters, one of which shall be from the head of the department in which the applicant majored, and another which shall come from the particular scientific group with which the applicant is associated.

B. A detailed report of any practical work done.

C. Indication of good faith, including intention to abide by restrictions mentioned in paragraph 1.

The following officers were elected for the year 1927 :

President : Dr. A. A. Brill.

Vice-President : Dr. Monroe A. Meyer.

Secretary-Treasurer : Dr. Abraham Kardiner.

The President appointed :

Corresponding Secretary : Dr. Philip R. Lehrman.

February 22, 1927.

a. Dr. A. A. Brill : Annual Address of the President-elect. The brief address exhorted the members to be more productive, stressing the fact that clinical material rather than theoretical was most desirable for the purpose of reporting their findings.

b. Dr. H. W. Frink : The Case of Mr. Dudley Stackpole. The speaker prefaced his attempt at a psycho-analytic interpretation of a story by Irvin Cobb, by suggesting that such material may well lend itself for presentation before non-analytic physicians or medical students to acquaint them with psycho-analytic methods.

At the business session Dr. Thomas H. Haines was elected to membership.

The President appointed Drs. Frink, Oberndorf and Meyer as the Scientific Committee. He also appointed the Educational Committee as follows : Drs. Oberndorf (Chairman), Kardiner, Meyer, Frink, Stern, Jelliffe and Lehrman.

March 29, 1927.

a. Dr. A. Lorand : Dreams as the instigator of latent neurosis.

b. Dr. B. Glueck : Psycho-analytic reflections on two homicides.

Dr. Glueck attempted to account in psycho-analytic terms for an atrocious murder of a boy by two young men of excellent education and station. The material, gathered as it was under the difficulty of a prison environment, was insufficient for a complete psycho-analysis, but nevertheless threw a great deal of light on the sensational homicide. The discussion was of special interest on account of the participation of Dr. William A. White, of Washington, who was co-examiner with Dr. Glueck of the accused.

At the business session Dr. Wearne's resignation from the Society was accepted.

Philip R. Lehrman,
Corresponding Secretary.

Second Quarter, 1927.

April 26, 1927. Dr. D. Feigenbaum : A new interpretation of an old case analysis. This was a review of the case originally described by Dr. Breuer in the Studien über Hysterie in the light of present-day theory. The discussion was particularly interesting because of the presence of Dr. S. Ferenczi, who contributed some historical data about this case and the early history of psycho-analysis.

In the absence of Dr. Brill, Dr. Meyer presided.

May 24, 1927. Dr. Adolph Stern : A difficult Œdipus situation in an adolescent. A fifteen-year-old boy suffered from hysterical fainting, erotic phantasy activity and masturbation due to a seduction at the age of eight. A technique modified owing to his youth resulted in definite improvement.

Dr. A. Kardiner : A brief report on a case of impotence. The material was lucidly presented and the mechanisms of the cure clearly evident.

At the executive session, Dr. Lillian Powers was elected to active membership, and Dr. Sarah R. Kelman and Dr. Stanley King to associate membership.

The constitution was amended as follows : The disbursement of the Educational Fund be entrusted to three special trustees. The following trustees were elected : Dr. C. P. Oberndorf, Dr. A. Stern, Dr. S. E. Jelliffe.

The report of the Committee on Policy was read and approved. The report deals in a more positive way with the Society's attitude toward lay-analysis. A copy (enclosed) of the statement was sent to the President of each branch of the International Psycho-analytic Association.

In the absence of Dr. A. A. Brill, Dr. M. Meyer presided.

Philip R. Lehrman,
Corresponding Secretary.

RUSSIAN PSYCHO-ANALYTICAL SOCIETY

Second, Third and Fourth Quarters, 1926

April 15, 1926. Wera Schmidt: Paper on *Das Ich und das Es*. Part I.

April 22, 1926. Dr. Bernstein: The problem of the form and the scheme in modern psychology. A sharp distinction must be drawn between the form and the scheme. The first is determined quantitatively; the second qualitatively, or topologically.

May 13, 1926. Dr. Winogradow: A case in which the patient, acting on an obsessive impulse, burnt herself to death. The writer thought that in this case—that of a girl whom an obsessional impulse drove to commit suicide by burning—illustrates the isolated operation of the destructive instinct.

May 27, 1926. Dr. Friedman: Paper on *Das Ich und das Es*. Part II.

June 3, 1926. Wera Schmidt: Children's questions about the origin of human beings. The gradual development in children of the interest in sex was illustrated by a number of observations. The writer also laid down certain pædagogic principles for the training and enlightenment of children in matters of sexuality.

September 29, 1926. *Business Meeting.*

October 8, 1926. Dr. M. W. Wulff: The economics of psychic processes. (Compiled from various sources.)

October 15, 1926. Dr. Wnukow: On the psychology of reactive states. The speaker discussed certain cases arising out of forensic psychiatry.

October 28, 1926.

1. Dr. Wulff: Hate and the death instinct. (Compiled from various sources.)
2. Dr. Friedmann: Does psycho-analysis contradict dialectic materialism?

November 4, 1926. Wera Schmidt: The development of the epistemophilic instinct in a child.

November 11, 1926. W. Rohr: Hegel and Freud.

November 18, 1926. Professor S. Liwschiz (guest of the Society): Hypno-analysis.

November 25, 1926. Short communications:

1. Dr. Friedmann: A symptom which indicates a connection between anal erotism and homosexuality.
2. W. Rohr: A typist's parapraxis.
3. Frau Dr. A. Rohr: Disease amongst primitive peoples.

December 2, 1926. Joint meeting with the Hypnological Society. Discussion on Professor S. Liwschiz's paper.

December 9, 1926. Professor Kannabich: The pseudological disposition (account of an article by Dr. Judin).

Al. Luria,
Secretary.

First Quarter, 1927

January 27, 1927. Frau Dr. Awerbuch : W. W. Rosanon (an attempt to analyse his literary work).

February 3, 1927. Discussion on Frau Dr. Awerbuch's paper.

February 16, 1927. Dr. Wulff : On affects (a report).

February 23, 1927. Al. Luria : On experimental research in the primitive mode of thought in children.

March 10, 1927. L. Wygotsky : Psychology of art in Freud's works.

March 17, 1927. Al. Luria : Review of Bychowsky's book : *Die Metapsychologie Freuds.*

April 7, 1927. Dr. Wulff : Psycho-Analytical elucidation of the material collected during the examination of the Moscow motor-bus drivers.

Business Meeting.—Al. R. Luria desired to resign his office of Secretary of the Society. The Society accepted his resignation with regret, and expressed its thanks for the work he had done as Secretary.

Wera Schmidt was elected to serve in his place.

April 14, 1927. Dr. Friedmann : Latent homosexuality and depressive states.

Wera Schmidt,
Secretary.

SWISS PSYCHO-ANALYTICAL SOCIETY

Fourth Quarter, 1926

October 23, 1926. Dr. M. Müller : A contribution to the problem of the tendency to recovery in schizophrenia.

November 13, 1926. Dr. H. Tobler : Everyday pedagogy in the light of psycho-analytical knowledge.

December 18, 1926. Dr. E. Blum : Suggestion and psycho-analysis. (Subject for discussion.)

Dr. E. Oberholzer,
President.

VIENNA PSYCHO-ANALYTICAL SOCIETY

Fourth Quarter, 1926

October 6, 1926. Dr. Wilhelm Reich : The genital-narcissistic character.

October 20, 1926. *General Meeting.*

Programme :

1. Points arising out of the treatment of out-patients.
2. The Training Institute.
3. Treasurer's Report.
4. Subscription for membership.

5. Election of Officers. The following were chosen to form the Committee: Professor Freud, President; Dr. Federn, Vice-President; Dr. Jokl and Dr. Reik, Secretaries; Dr. Nepallek, Treasurer; Dr. Nunberg, Librarian; Frau Dr. Deutsch, Principal of the Training Institute; Dr. Hitschman, Director of the Out-Patient Department.
6. Discussion of the place to be chosen for the Congress.
7. The question of the medical specialist.
8. Motions put to the meeting.

November 3, 1926. Professor Schilder: Notes on the psycho-analysis of a case of amentia.

November 17, 1926. Short communications and reviews. Doz. Dr. Friedjung: The psychology of the politician.

December 1, 1926. Short communications:

1. Dr. Isakower: Clinical observations in cases of post-climacteric depression.

   The following took part in the discussion: Frau Deutsch, Drs. Federn, Reich, and Sterba, Princess Marie of Greece (guest of the Society).

2. Dr. Bibring: Some observations in cases of paranoia.

December 15, 1926. Dr. Heinz Hartmann: Some methodological questions in psycho-analysis.

The following took part in the discussion: Jokl, Reich, Schilder, Wälder.

Business Meeting.—Frau Dr. Alfhild Tamm (Stockholm, Stureparken 2) was elected a member, and Dr. Eduard Kronengold (Vienna I, Grünangergasse 3) an associate member of the Society. Frl. Frieda Teller (Prag) has resigned from the Society.

First Quarter, 1927

January 12, 1927. Hedwig Schaxel: Problems connected with the training of little children.

January 26, 1927. Short communications and reports:

1. Federn: A parapraxis in a dream.
2. Reik: Sexuality and the sense of guilt.
3. Hitschmann: Inquiry into the family relations of psycho-analytical patients.

February 9, 1927. Dr. Theodor Reik: The over-stressing of the trauma in psycho-analysis.

February 23, 1927. Short communications and reviews:

1. Reik: A criticism of the discussion between Reich and Alexander on the subject of the need for punishment and the neurotic process. The Society postponed discussing this subject until

a detailed account of the matter should be given by Wittels.

2. Hitschmann : An observation relating to Knut Hamsun. Why is it that physicians do not occupy themselves more with the application of psycho-analysis to the mental sciences ?

March 9, 1927. Dr. Helene Deutsch : On the psychogenesis of agoraphobia.

March 23, 1927. Short communications and reviews :

1. Steiner :
   a. A slight parapraxis.
   b. The dreams of unsuspecting persons.
   A discussion followed.
2. The Amazons (Bachofen : Primitive religions and ancient symbolism).
3. Federn : A man's rejection of the penis.
4. Spitz : A precursor of the Œdipus myth found in Herodotus.

Business Meeting.—The following were elected members of the Society : Dr. Heinz Hartmann (Vienna I. Rathausstrasse 15) ; Hedwig Schaxel (Vienna I, Ring des 12 November, 8).

Dr. R. H. Jokl,
Secretary.